

# CHILDREN OF THE STORM

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**CHILDREN OF THE STORM**

Experiences of the Children's Rehabilitation Center

Jasmin Espiritu-Acuna





## FOREWORD

Most of us have a rather traditional view of torture. Most people are of the opinion that torture is employed by a person with some kind of public authority to force another person to give information with the purpose of weakening the opposition in the country in question.

Both the opinion of who the victims of torture are and what the purpose of torture is has undergone a change during the last ten to twenty years.

The Rehabilitation Centre in Copenhagen has contributed to this, among other things by pointing out that the aim is often to break down the personality of a person so as to destroy this person and to frighten others - rather than to extract information.

The Children's Rehabilitation Center in the Philippines has contributed to opening our eyes to the fact that there is seldomly just one victim of an act of torture.

What has made the greatest impression on me in this book is the fact that for every person whose rights are infringed, there are children who are also affected.

In other words: Any person who is in the physical sense a victim of torture has relatives, especially children who suffer and who are in reality just as much or even more the victims of the torturer and the regime.

I believe this very significant fact is important in the future work against torture which takes place in the Philippines, in Denmark and in many other places.

It shows that not only "contending parties", government and opposition, but also complete outsiders become involved and suffer under the consequences of these horrible acts.

Furthermore, it shows that the responsibility of the torturers and their employers is far heavier than many perhaps thought, and that the victims must be counted among those who everybody unconditionally say they want to help: **THE CHILDREN.**

The message of this book is therefore vital in our mutual fight against torture, our mutual fight for people and their children. I am therefore very happy to be given the opportunity to recommend this book most warmly.

OLE ESPERSEN, M.P.  
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Former Minister of Justice  
Chairman of the IRCT Board  
(International Research Center for Torture Victims)  
Copenhagen, Denmark



## PREFACE

The Marcos years left behind a legacy of violence in the Filipino people. Many of those who protested were put behind bars, tortured or left destitute by the mammoth military institutions he created. Others were killed leaving behind them families who were to bear the brunt of his punishment long after he has left the political scene.

The first two Aquino years are no better. Failing to dismantle the military organization that perpetuated itself in absolute power during the Marcos years it has continued the oppression that those years have put in place. The declaration of total war against the insurgents has declared illegal the people's just cry for real change in their social, economic, and political situation. In the midst of this violence a nation is trying to educate its people for peace. And it is almost like after screaming and brutally punishing a child we ask him to learn to speak softly and act gently.

For every Filipino whose rights are violated there are children who are affected. Every prisoner who is put behind bars has a wife and children who suffer the loss of a supporting husband and a loving father who cannot perform his functions for his family. This book is about some of these children. It is a glimpse at the private lives of a few of these innocent victims who must carry the burden of violence and aggression that is still going on in many parts of the Philippines.

A few psychologists and social workers have tried to do something about the children and this book documents some of these efforts. The physical deprivation is easy enough to alleviate, the psychological scars take much longer to heal. With loving and caring, with laughter, music and art, healing and normal life are approximated.

Fears that come from traumatic experiences with witnessing a parent's arrest and anxiety over not seeing him again because he might have been killed, recur in children's dreams as their longing for the parent is intensified by years of separation. How does one make a child accept the fact that his father or mother may never come back? How does one teach a child to trust a world that so arbitrarily takes their loved ones away? And how does one recapture for our children their lost childhood because they had to assume the responsibilities of their parents who had to leave them behind?

We have no psychological theories on which to base our work. Psychological schools do not specialize with therapy and rehabilitation of victims of detention, torture or displacements. We had to use our intuitions and observations with our own children, to enable us to reach them and they taught us how to work with them.

We saw that many were often deprived of self-respect as the conditions under which they had been forced to live were



dehumanizing. Often they were deprived of basic material needs as well. Rebuilding self-respect is based on being able to realize one's potential for changing the conditions of one's life. It is based on being able to choose, to control one's circumstances. We created some of these opportunities for the children and their parents.

We knew that man's capacity for long suffering is amazing if this sacrifice is meaningful for him to achieve a long term goal and if it is his choice. We tried to clarify for them reasons for their sacrifices and trials. Reality is something we cannot change. But we can alter their attitudes about their plight. And we can replace the sense of hopelessness and helplessness into hopefulness in real alternatives. We helped them explore the various opportunities that can lead to an improvement in their material and psychological conditions. We found play and art as good mediums for establishing this meaning and exploring these alternatives.

Opening up is probably the hardest of all with children who have learned that the truth can cost their lives or the lives of those very dear to them. We found that other children who have shared similar experiences can draw them out of their silence much faster than any of us adults could. And we found that discovering their real potential was the fastest way to establish goals for the children. Theater and art were a way of expressing their suppressed emotions and mastering their unspoken fears. Many were talented and the discovery was a source of joy not only for these children, but for us as well.

Most of all we found that we had to teach our children how to play. For our children whose grim reality has deprived them of joy and mirth play is needed. Play has become a potent tool for working out their fears and their future roles. If our hope is for the children to transcend their early exposure to violence and aggression they need to overcome the pent-up anger within themselves and we hope that our work with them would have taught them that not all people are aggressive and cruel. For we believe that love is healing and caring will bring out the best in our children. And with patience we can teach them that despite their cruel surroundings and the poverty that oppresses them man is basically good so they can strive to make their own world better.

We work against all odds. For every day more children are displaced and zoning is a regular part of military operations. We are able to reach only a very small segment of the victims of such operations. We are a nation faced with children who have been brutalized by such experiences. We also know that violence cannot be a way to peace and our future is somehow going to be shaped by such militarization.

But for these children it means a lost childhood. It means not knowing security and safety. It means not knowing laughter or joy. It means not knowing how it is to be held close in a loving embrace, to know that everything is alright. It means not knowing how to be

that special someone in another's eyes. It means growing up without caring and loving.

This book is for our children who taught us about the process of healing. It is the story of our experiences with them. It would not have been possible without the dedicated men and women of our Center, without whom our journey would not have been possible.

Jasmin Espiritu Acuna, Ph.D.  
December 18, 1988



## Contents

I. Who are the children of the storm?	1
<i>Anak ng Kalayaan</i>	4
<i>A Child of the Revolution</i>	5
II. Dynamics of Attachment: The Child's Understanding of Death	6
<i>Reflections</i>	25
<i>Anak</i>	26
III. On Understanding the Dynamics of Aggression	27
<i>The Christ I know</i>	42
<i>Lola at Cheche</i>	43
IV. Stress and Coping Among Displaced Families	44
<i>Kapatid</i>	53
<i>My Lord</i>	54
V. Children's Rehabilitation Center Report of Activities	55



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## WHO ARE THE CHILDREN OF THE STORM? \*

By 1984 the number of political detainees in the Philippines reached alarming proportions. The professionals who dared express their protest were not spared. When a psychologist from the University of the Philippines was imprisoned it came to her attention that there were children in these detention Centers. Of course, there were more children affected who were not even visible to the observers. For every father or mother imprisoned there are children whose needs for safety and security of family life are not met. And these children are the innocent victims of the social conflict. It was alarming for her as it was for us that absolutely nothing was being done for them. In some cases the children had to stay with their fathers or mothers in prison as they had no where else to go.

This study on the children of political detainees was conducted by Elizabeth Marcelino on thirty such children, 13 fathers, 10 mothers, 4 grandparents, and 9 unrelated political prisoners. The interviews and observations were done inside the detention center. Though an interview schedule was prepared, interviewing style was informal and conversational. Interviews were held in groups to allow others to check the information being presented. She supplemented the interviews with observations of the condition of the children and their coping with the situation. What was immediately apparent was the children's adjustment was very closely tied up with the way in which the parent was coping with the crisis itself.

The children were living in a constant state of stress, as the parent in prison was constantly stressed. Fear and apprehension revolved around the loss of parental security and protection. Since most of the political prisoners were fathers, the mothers needed to cope with the husband's detention with her own feelings of grief and loss. She found it very difficult to fulfill the role of the mother, let alone compensate for the loss of the father.

The children could not figure out why their parents have been arrested, tortured and detained. To them imprisonment is associated with criminal behavior. These lead to feelings of shame and social isolation.

Most of the children are forced to live below subsistence level with the loss of their father's support. the majority became sickly because of malnutrition. Some were compelled to stop schooling. Others were forced by

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\* Abstracted from STRESS AND COPING AMONG CHILDREN OF POLITICAL PRISONERS IN THE PHILIPPINES, a masteral thesis of Elizabeth Protacio Marcelino, 1985.



circumstances to live in prison because their families could not afford to pay for rent.

Among the symptoms noted were withdrawal, depression and irritability. Excessive clinging and dependence on the parents and marked aggressiveness with generalized fear were common. Excessive fantasizing and loss of appetite, insomnia, nightmares and other sleep disturbances were also usual. Unclear and distorted concept of a family particularly about the role and place of the detainee in the family was noted. Cynicism toward the detained parent(s) and/or the cause the parents are fighting for was common. Usually there is regression in school performance and social integration. There was also a tendency to be more vulnerable to other stresses and crisis.

Various coping mechanisms were observed. Children asked questions to clarify their fears and doubts of parents, other political prisoners and other supportive adults. They were trying to make sense of their situation. They solicited attention, support and action. Sometimes by crying, by tantrums or by direct requests. They engaged in fantasy, games and prayed. They tried to arrive at real solutions to their problems alone or in groups by saving, by taking care of pets, by trying to create fun games. Sometimes they enacted their trauma to try to achieve mastery over the fears and at other times they watched violence on television to understand their own fears.

Some factors were observed to intensify stress and hinder the development of healthy coping mechanisms. These were exposure to the violent arrest and torture of parents, wrong explanations for the situation, poor physical health, conflicts between detainee and relatives the children are living with, insufficient knowledge about child care resulting in conflicting methods of discipline, and the amount of available resource available to the children. These resources are mostly economic in nature as the immediate needs of the children need to be fulfilled. Then the psychological resources are also important. The amount of support for the beliefs of the detainees' that can build the sense of security of the child even without the parents's presence.

The non-detained parent links the arrest and detention to the rules and norms of society and redirect the children's attention and action away from hopelessness and depression toward more positive and valuable goals. The success or failure of the coping actions of the children depend on the ways in which the adults around them respond to the coping initiatives of the children.

Since the severe disruption of family life and the remaining parent's attention (usually the mother) centered



on efforts to find and ensure the safety of the detained parent, very little attention was given to the children's needs and coping. Even in cases where the parents responded to coping attempts, the children had difficulty understanding the explanations by the parents because they were in conflict with traditional concepts of arrest and imprisonment. Moreover, severe economic needs weighed on the parents, just providing for the basic needs of the children was a big task in itself. Besides none of the adults were familiar with methods of dealing with children in crisis.

Thus most of the children were prevented from satisfactorily coping with the crisis situation. During this second stage intense psychological and physical disorder symptoms were observed.

Adjusting to new family roles and responsibilities, facing problems revolving around the families' economic difficulties--adjusting to a new house or a new school or even a new neighborhood, these were among the many stresses that occupied the remaining parent's attention during this stage.

There are two levels at which problems can be addressed. At the individual level the physiological-psychological aspects of the children can be addressed, and at the social, family or group level, the sociopolitical aspect focusing on society's economic and political structure can be addressed. Helping children of political detainees must cover both these aspects in order to be effective.

In other words, treatment and rehabilitation of children cannot only be confined to reinforcing internal, motivational and affective factors, cognition of the external influences affecting the father's or mother's detention are just as critical in the children's adjustment. These cognitions affect the coping efforts of the children. The general aim of calling for a broader support for freedom and amnesty for all political prisoners is therefore perceived as part of the struggle for justice, freedom and democracy of the Filipino people.



**ANAK NG KALAYAAN**

Anak, huwag mong hanapin ang iyong ama.  
Buhay niya'y ibinuwis sa ating himagsikan  
Huwag kang umiyak sa kaniyang paglisan,  
Pagtitibay ng puso'y iyong pagaralan.

Anak, mahal na mahal ka rin niya,  
Lamang ay higit ang pangangailangan ng bayan,  
Gusto rin niyang umuwi sa atin,  
Lamang ay manganganib pati kayo.

Anak kung siya ay nawawala sa ating piling,  
May hinaharap tayong siyang darating.  
Araw ng liwanag at kalayaan,  
Hinahanap, isinisigaw, at pinaglalaban.

Anak, patay na siya.  
Kay lupit ng kaaway na pumaslang sa kaniya.  
Sayang ba ang buhay na kaniyang inialay?  
Sayang ba kung ito'y nagmulat sa ating kababayan?

Anak, kasama natin siya;  
Sa araw araw na pakikipaglaban ay naanduon siya,  
Nagpapalakas ng ating loob, nagtuturo sa atin ng landas  
Upang marating ang buhay na marangal at may kalayaan.



A Child of the Revolution

I do not know how it is  
to be a child of the revolution.

But I do know how it is  
to sacrifice my parents to the revolution.

For my parents have embraced their ideals  
and imprisoned themselves in their struggle.

I know how it is to listen  
to a fairy tale about freedom.

I know how it is to bid my parents goodbye  
unsure of their return.

I know how it is to kiss them  
as if it were the last.

I know how it is to pray for a tomorrow  
when my parents shall be mine at last.

But I do not know how it is  
to be a child of the revolution.

Lyn Rhona Montebon  
CRC Staff



## DYNAMICS OF ATTACHMENT: THE CHILD'S UNDERSTANDING OF DEATH\*

### I. Introduction

When we talk of war, there is always a feeling of heaviness that overcomes us, for in every war, there are always casualties - the injured, the maimed, and those killed. For whatever reasons these wars take place, it is unfortunate that only the adults have the capacity to understand these reasons. Children who bear the heaviest brunt of these events remain in the dark--scared and confused. How does one explain to a child the facts of war?

Their fathers have been arrested and their mothers have been missing for a long time. They have to transfer to a neighbor's house and change their names so that the military will not be able to track them down. After two weeks or so, they are told that their mothers' decapitated body had been found and that their heads had been thrown into a rice field three meters away from where their bodies were found. The next thing they know, they are whisked away to a strange place to talk to strange people about the case of their parents. Consider the confusion of the children at this point. How does one tasked with the rehabilitation of these children go about explaining the experience of death and all its attendant emotions?

It is our hope to present in this paper, two things: First, the experience of the children at the Children's Rehabilitation Center regarding the death of their parents and how they have coped with the situation; and secondly, the antecedent determinants of the outcome of the grieving process they go through. This second part puts emphasis on the relationship of the child with the deceased, the dynamics and strengths of their attachment prior to the loss.

Several cases will be presented to enhance the discussion of certain theories. The first case talks of how a four-year old child learns to cope with his father's death through storytelling. The second case illustrates the difficulties of a child going through the grieving process with no stable attachment figures. The third case, on the other hand, shows how a child who has internalized his parent so well that he swiftly goes through the grieving and jumps right into the responsibilities given him. The last case is that of a child who finds herself alone with no one to love and identify with, so she lashes out anger in the direction of the deceased and the

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\* Written by Ma. Elisa Esguerra for a course in Cognitive Psychology, March, 1988, University of the Philippines, Diliman, Quezon City.



remaining parent. This discussion will be synthesized into a model of the grief process and how attachment plays a major role in the completion and integration of the child's coping behavior with the death of a parent.

## II. BACKGROUND

Children are experiencing the loss of their parents in the violence of war in the country sides. Sometimes, children themselves are victimized by the political- armed conflict between the government and its armed forces (including paramilitary units) and the rebel groups. No less than five million children have been affected by this conflict since 1972. They are victimized not only because they are children of victims of human rights violations and atrocities but also because at times they are themselves victims of torture, arrest and detention, forced labor, rape and manhandling, massacres, execution and mutilation, abduction, bombings and strafings, forcible evacuations, including food blockades, burnings, etc. This is to say that the ultimate consequence of war on the children is their own death. For those who survive this harrowing experience, physical health and psycho-social problems take their toll on their young minds and frail bodies. These are the objects of study and focus of treatment in the Children's Rehabilitation Center.

## III. CASE DISCUSSIONS

PEDRO: (Reality testing through storytelling)

Such is the case of this 4 year old child. Let us call him Pedro. Pedro's father had been dead for a year but his mother could not gather enough courage and strength to tell her children about their father's fate. Through this period of time when the children did not hear from their father, they started having nightmares. They started talking of their father in different ways - sometimes, the loving and caring father that they remember; at other times, the hateful person who doesn't love them anymore because he has not visited or written them ever since he left the house. They reacted to these fragmented images of their father in various ways - talked to his portrait which hang on top of their bed, prayed to God to send their father back, talked to him in their games as if he were there, retold his stories they loved so much, or simply narrated their fond memories of their father. The worst part was when Pedro would throw tantrums and blame his actions on the absence of his father. It took very little effort to convince Pedro's mother that the children needed to know the whereabouts of their father. What follows is the conversation which took place between Pedro and his mother when she finally decided to tell him:

Mother: (While walking in a park where the family used to go, so that Pedro started talking about how he wished his father

were with them at that time) Alam mo anak, may sasabihin ako sa iyo.

Hindi pa ito maiintindihan ng kapatid mo kaya sa iyo ko muna sasabihin. (I need to tell you something. Your brother will not understand this fully so I will tell you about it first)

Pedro: Ano iyon,'nay? (What is it mother?)

Mother: Alam mo anak, patay na ang tatay mo...(Your father is dead.)

Pedro: Ha! Anong ibig sabihin noong patay na? Makikita ko pa ba siya? Babalik pa ba siya? Makakausap ko pa ba siya? (What does it mean to be dead? Can I still see him? Will he come back? Can I still talk to him?)

Mother: Siguro anak, kung magpapakabait ka, makikita mo pa ang tatay mo. (Maybe child, if you are good you can still see your father.)

But knowledge of his father's death did not help him any. Eventually, Pedro could not resist talking about his important secret with his younger brother, Butch. It did not help him any, either. They became over-anxious for their mother, doing things contingent on her absence or presence. Still, Pedro gave way to tantrums and anti-social behavior such as getting coins from his mother's bag. This behavior proved more bothersome as he started getting money from the tricycle driver who brought him to and from school. This specific behavior went on and on and no amount of heart-to-heart talks between Pedro and his mother could resolve the problem, until one day, Pedro told his mother that the reason why he was doing this was because he did not want her to leave the house anymore. He was asking her to stay in the house because he feared that what happened to his father would happen to his mother as well.

Indeed this is a case of attention seeking behavior brought about by the anxiety of the child resulting from the loss of his father. Pedro is seeking his mother's attention not only out of fear but also because of his need for assistance in understanding the feelings going through him as a result of knowing of his father's death. Pedro and his younger brother are both grieving the loss of their father. Because their mother could not and would not show any emotion or reaction to this loss or if ever she did feel the loss, she refused to exhibit these emotions in front of her children, they remained confused about their own feelings.

Pedro was the elder of two children of a salvage victim. Intensive therapy sessions were undertaken with these two children for a period of three months, until a breakthrough occurred through storytelling.



Case Worker (CW): May kuwento ako sa inyo tungkol sa bayan ng mga unggoy. Alam ninyo, doon sa bayan na iyon, may nakatirang isang pamilyang unggoy. May tatay unggoy, nanay unggoy at dalawang batang unggoy, siguro mga kasing-laki ninyo. Masaya sila doon dahil magkakasama silang pamilya, pero mayroon ding lugar sa pook nila kung saan may mababangis na buwaya. Isang araw, madilim na, hindi pa nakakauwi yung tatay unggoy. Tinanong ng isang batang unggoy, "Nanay, bakit wala pa si tatay?" Sabi ng nanay, "Ganyan talaga ang trabaho ng tatay mo. Sa gabi lang niya kasi nakakausap ang ibang unggoy sa bayan tungkol sa kanilang mga problema. Tinutulungan ng tatay ninyo ang mga unggoy na ito para malutas ang kanilang mga problema doon sa malalaking buwaya sa gubat. Kinakain kasi ng mga ito ang mga halaman ng mga unggoy at kung ubos na ito, pati ang mga unggoy mismo ay nilalapa rin.

(Once upon a time there were monkeys in a certain country. In one of the provinces a family of monkeys lived. There was a father monkey and a mother monkey and there were two children monkeys. They were a very happy family. But there also lived in their place crocodiles--fierce crocodiles. One day the father monkey did not come home. The children asked where their father was. The mother explained the work of the father took him to other places to talk with other monkeys about their problem. He helps other monkeys deal with the fierce crocodiles in the forest and he can see these monkeys only at night. The crocodiles eat their harvest and the monkeys themselves.)

Pedro (a four year old): Tumutulong si tatay unggoy sa kanila? Salbahe pala tita, yung mga buwaya? (Father monkey helps them. Those crocodiles are so bad, Tita)

CW: Oo. Ang tatay unggoy naman, 'yan ang kaligayahan niya - na makatulong siya sa mga inaapi sa bayan. (Yes, and the Father monkey finds joy in being able to help the oppressed of the place.

Butch (a three year old): Ang bait ng tatay unggoy. 'Pag laki ko, gusto ko ganyan din ako! Para rin, tita si Tatay namin. (The Father monkey is so good, Tita. When I grow up I want to be like the Father monkey.)

CW: Kaya lang alam ninyo, isang araw, hindi na nakauwi si tatay unggoy. Ang naging balita ng ibang unggoy, nakuha raw ito ng mga buwaya at kinain. Patay na raw ang tatay unggoy... (But you see one day the Father monkey was unable to come home. The fierce crocodile ate him and he died.)

Pedro: Ay tita, ano ang ginawa ng batang unggoy, umiyak ba siya? (Oh, Tita, what did the children do, did they cry?)

CW: Oo, siyempre. Di ba mahal na mahal nila ang tatay nila, kaya nalungkot sila na wala na silang tatay at nag-iyakan sila. (Of course. Didn't they love their father? They were so sad when he was gone and they all cried.)

Butch: Tita, makikita pa ba nila ang tatay nila ulit?  
(Will they see their father again?)

CW: Hindi na, kasi patay na ito at hindi na ulit babalik.  
(No, they won't because he is dead and he won't come back.)

Butch & Pedro: Aaah..... (sabay na tumahimik at bumalik sa paglalaro sa labas ng bahay). ( They all sighed and fell silent and they went back to playing outside the house.)

This is a very concrete example of how children react to a new life situation. They require an adult to set a pattern of reactions, without which they have nothing to identify with, so that confusion sets in. This confusion could result in psychosocial and behavioral problems of the child.

Claudia Jewett (1982), in her book *HELPING CHILDREN COPE WITH SEPARATION AND LOSS* says that grief is the normal response to the loss of a loved one. She also says that it is important to work through in the mourning process without interference and repression. She says that when children respond in a confused manner it is commonly a result of having parents with little understanding or sympathy for the desire for love and care, either for themselves or their children. After a loss, therefore, these who parents stifle their own grief and tend to be specially insensitive to how their children are feeling. She continues to say that sometimes, talking about one's feelings is not enough. People need a physical component in the release of feelings. Because of this, grief is something very painful to watch in children. Since everyone is likely to wish that the child may escape from this pain, denial may be reinforced even by the very persons helping the child to work out his feelings.

This is the situation in this particular case. The mother felt she had to keep a strong front. But in not showing overt signs of grief and mourning in front of her children, she inadvertently gave them a model for denying their feelings. She even mentioned her belief that to show her children her emotions of pain would make them think she was weak and would cause them to feel more scared.

The caseworker (CW) advised the mother to talk openly about the death of her husband with her children. She was encouraged to answer all the questions her children asked regarding their father's fate to the best of her knowledge so that in the process, if she felt like giving way to her emotions, she should let go. The pain and the loss are real. And nothing is more healing than to express that reality and to face up to it.

In other words, she was given the assurance that crying in front of her children would do the whole family good. This would make the children feel free to express their own feelings of



loss, too. This open sharing of feelings would facilitate the children's understanding of the experience of death.

Lily Pincus in her writings on death and the family summarizes this point very clearly when she says that young children get their understanding of life primarily through their senses and not their intellects. Particularly with difficult and emotionally laden information, it helps to tie up this news to a sensory or bodily connection. This information, then becomes more real to the child if it is conveyed through what might have been seen or heard. With the experience of death, we work on the grief and mourning process to explain and make the child understand its finality and irreversibility.

MARIA: (Understanding death and the grieving process)

Maria is a ten year old child who lost her mother when she was only two. Her internal cognitions are revealed in this short talk.

CW: Alam mo ba kung paano namatay ang nanay mo? (Do you know how your mother died?)

Maria: Hindi. (No)

CW: Nakita mo ba ang katawan ng nanay mo ng mamatay siya? (Did you see your mother's body when she died?)

Maria: Hindi. (No.)

CW: Sinabi lang sa inyo na namatay siya? (They just told you that she was dead.)

Maria: Opo. (Yes.)

CW: Anong ginawa mo nang sinabi sa iyo 'yon? (What did you do when they told you that?)

Maria: Maliit pa ako noon, tapos, hindi ako umiyak. Ang umiyak lang ay si kuya at saka yung isa pa naming kapatid. Nalungkot lang ako! ( I was young then, I didn't cry. My older brothers and sisters cried. I became sad.)

CW: Bakit ka nalungkot? (Why were you sad?)

Maria: Ewan ko, kasi namatay ang nanay ko. (I think it was because my mother died.)

CW: Para sa iyo, ano ba ang ibig sabihin ng patay? (What does death mean for you?)

Maria: Ewan ko. (I don't know. )

CW: Di ba sabi mo sa akin noong isang araw, pag mag-isa ka, tapos wala kang ginagawa, pag-naiinip ka, naiisip mo ang nanay mo? (Didn't you tell me the other day when you are alone and not doing anything, you think of your mother?)

Maria: Opo. (Yes.)

CW: Ano ang naiisip mo pagka ganoon? (What do you think of on those occasions?)

Maria: Nalulungkot ako, naaalala ko siya. (I feel sad when I think of her.)

CW: Anong naaalala mo? (What do you remember?)

Maria: Noong dati, pag natutulog kami, lagi kaming magkatabi... (Before when we sleep we were always together.)

CW: Anong ginagawa mo pag naaalala mong wala na pala ang nanay mo? (What do you do when you remember that your mother is gone?)

Maria: Wala, umiiyak! (Nothing, I cry!)

Nagy (1948) came up with an analysis of children's theories concerning death. He talks of the first two stages when the child is about 8 years old and below as the age when they think death is something external to the self and is reversible. Also, the child recognizes death only insofar as he experiences separation and takes whatever is told to him literally. Because the child does not think of death as being permanent, he will tend to look for the deceased person often and think that his behavior had something to do with his loved one's absence. In other words, the child begins to blame himself for his parent's death.

Sample 2 gives substance to Nagy's theory that at 2 years old children are unlikely to exhibit strong affective response to death, not because they are unfeeling but because their expressions of emotion are still limited. Let us name this child Maria. Maria did not see the body of her mother when she was told that she had died. In fact, prior to her death they had not seen each other for a long time. This further reinforces the probability that Maria cannot think of her mother as really dead. At this age, what a child does not see or hear or feel is not real. So, death is not real, it is not something to feel strongly about. Unfortunately, as the child grows older, parent absence and separation confronts the child face to face. Without adequate support systems, the child is unable to handle this problem.

Jewett (1982) goes on to say that the loss of a parent to death or separation strikes a blow to a child's developing sense of trust and self-esteem, causing feelings of powerlessness and



shame. This is specially true for children who have had a short chance of establishing or experiencing life's dependability - nurturance, responsiveness, trust, confidence and competence.

Maria was unfortunate to have lost her mother at the age of 2. Periods of substitute care, further compounded her coping with the loss. Since her mother's death, she had been transferred four times to different caretakers until she was brought to the center. Each time she was transferred, she believed it was because she was so unlovable that no adult caretaker could live with her.

But this was not so. All her former caretakers speak fondly of Maria. It was due to financial difficulties that she was transferred to someone whom they believed could better provide for Maria's needs. But of course, Maria was too young to understand this. Now, she has begun to fear that all her relationships are doomed to failure. Her trust in the availability of support, comfort and protection has been badly shaken so that she views life as full of threatening surprises with painful consequences that she is powerless to deal with.

When Lily Pincus (1976) talked about death, she focused on it as a major change in one's life which constitutes a crisis and drives one to act either toward maturity or regression. If the desired response is forthcoming, the child can move on and make a step toward growth. Corollary to this, regression in grief must be supported as a means toward adaptation and health.

Because Maria was never really able to go through grief work completely, she has not resolved the pain of being separated from her mother. The difficulty of dealing with her own physical and emotional development and her relationships with her caretakers provided a smokescreen, much too thick for her to come out victorious.

To her brother, Maria is a carefree and cluttered girl whom he finds irritating and shameful. To one foster mother, she is a stubborn, hard-headed and impish child who cannot do anything right and crumbles in an emotional riot everytime she is reprimanded. To the case worker, she is a ten-year old child crying out to be treated like a three year old, wanting to be cuddled and touched to make up for all the years of having lived in uncertainty. She craves for attention and seeks security in every relationship with people who come to the center. When she does not find any of these things coming, she reverts back to any kind of behavior that will win her any form of attention. It is unfortunate that most of the time, it is the negative behavior that are remembered by the adults and this is what is reinforced. A vicious cycle of positively reinforced negative behavior is thus created and so, Maria finds herself as confused as ever.

As she said in the interview, when she gets lonely, she remembers the time when she used to sleep beside her mother for

it is in these thoughts that she finds comfort. However, with the acceptance that her mother is gone, she cries to herself, but surely in the hope that she can reach out to someone else.

The therapy program adopted for Maria purports to provide her with an individual with whom she can identify and attach herself to. This individual may either be an adult, who will provide the mother figure; or a child her age who will be a friend. At the time that Maria was brought to the center, she had just found herself someone to identify with and she had in fact established a close attachment to this particular foster mother. It was unfortunate that the transfer had to take place abruptly so that this separation proved very painful for Maria.

Having experienced a peaceful and comfortable family life, feeling loved and cared for--they were fun while they lasted. Until Maria came to the center she had to be responsible for her own things. Adjustments were very difficult for her. In fact, tantrums were a common outlet for bad moments and oftentimes, irresponsible behavior was enough to drive even the most patient caseworker up the walls. Eventually, Maria was able to develop an attachment to the caseworker--found in her the balance of authority and security. Through the regular group activities of the children, she learned to relate with other kids and fostered friendships even in school.

In the span of time that she has stayed with the CRC (one year), we still cannot say that we have been successful in providing her with the positive experience of finding a real attachment figure. We can only say that we have made her realize that she is capable of giving and receiving affection and love from other people--something which her past experiences rendered her incapable of even thinking herself as lovable. Maria is now fast growing up and earnestly looking for this person who will provide her with all the love and affection she missed out in her childhood. But this does not hinder her from mothering little children in the center. Mothers of this little children find in Maria a very loving and attentive babysitter. Maria, on the other hand, finds comfort in the fact that she is appreciated by the things she does. This self-rewarding behavior motivates Maria to do all the other things which she has to do with the minimum of prodding.

As Maria grows up, we go onto a different phase of her problems--those problems related to adolescence and puberty which makes for headstrong, adventurous acts. Curiosity and the eagerness to try out new things is a dangerous combination for someone who is only too willing to get what she can out of life and make up for things which she never had before. For this, we can only give her close guidance without making her feel that she is not trusted. We can only assure her that communication lines remain open if she ever needs someone to talk to. At the same time, she is provided constructive activities that will keep her from getting bored and thinking of unworthwhile things.



In the final analysis, only time will tell how Maria will be able to effectively cope with her very difficult childhood. Jewett refers precisely to this point when she says that children with such histories of hardship see life as comfortless and unpredictable and tend to respond by shrinking from it or doing battle with it.

Tinio: (The Hurried Child)

Tinio is now 11 years old and it has been a year that his father died. In this brief conversation, Tinio reveals how he has taken on the role of father to his siblings.

CW: Anong naaalala mo sa tatay mo? (What do you remember of your father?)

Tinio: Minsan, kapag dumadating siya sa bahay, nagmamano po ako sa tatay ko, tapos sasabihin niya, ang bait talaga ng anak ko. 'Yan ang papalit sa akin. 'Pag naaalala ko iyon, napapaiyak ako. (Sometimes I remember when he comes to the house I kiss his hand. He says my son is very good. He will replace me. When I remember this I am moved to tears.)

CW: Papaano ba namatay ang tatay mo? Alam mo ba kung paano? (How did your father die? Do you know how your father died?)

Tinio: Opo, Bago po siya namatay, lagi niyang sinasabi sa akin, anak, 'pag ako namatay, huwag kang iiyak. Tapos sinasabi ko, bakit mo ba sinasabi 'yan, matagal pa naman mangyari 'yan. Tapos minsan nang gumagawa yung mga kasama ng papa ko ng kalsada, sabi niya, dito idadaan ang karo ko. Sabi ng kumpare niya sa kanya, malayo pa yan mangyari kaya huwag niyang sasabihin iyon...(Before he died he used to tell me when I die son, don't cry. I would tell him how that will take a long time. He said that he wants his coffin to pass through this street where his friends are working.)

CW: Tapos noon, anong nangyari? (Then what happened?)

Tinio: Sunud-sunod na araw niya iyon binabanggit sa akin. Tapos isang araw, sabi niya, "Ikaw, Tinio, 'pag laki mo, ikaw ang papalit sa akin kaya kailangan ang loob mo, pagtibayin mo at lagi mong babantayan ang mga kapatid mo. Ikaw lang ang aasahan ng nanay mo at mga kapatid mo. Maging malakas ka." (He used to say it every day. He would say, "Tinio you have to be strong. Your mother and brothers and sisters will depend on you. Be strong.")

CW: Anong nararamdaman mo kapag sinasabihan ka ng ganoon ng tatay mo? (How did you feel when he said those things to you?)

Tinio: Kung minsan parang maluwag ang loob ko, tapos natatakot ako. Minsan, noong araw na mamatay siya, sabi niya sa akin, "Tinio, ito na ang huling araw ng pagkikita natin, aalis

na ako." (Sometimes I feel good, sometimes afraid. Once on the day he died, he said, Tinio this is the last time I will see you. I have to go.)

CW: Paano ba namatay ang tatay mo? (How did he die?)

Tinio: May inaayos silang kalsada, bumaha ang ilog, nahulog si Papa ko, sinubukan hagipin ng pinsan niya at ng kaibigan pero hindi nila nakuha. Tapos nakita na lang namin siya sa punerarya. (They were fixing a road and the river flooded, he fell. His cousin with his friend tried to catch him but they did not succeed. Then we saw him at the funeral parlor.)

CW: Doon niyo na lang nalaman na patay na siya o sinabi sa inyo? Anong naramdaman niyo nang sinabi sa inyo? (When you found out he died, what did you feel?)

Tinio: Umiyak ako, tapos hindi ko matanggap. (I cried and I could not accept it.)

CW: Bakit? (Why?)

Tinio: Kasi po, naaalala ko ang mga sinabi niya sa akin, kinukuwentuhan niya kami bago matulog at pinaaalalahanan. Natakot ako. (Because I remember the things he used to tell me when we tell stories before we go to sleep. I get scared.)

CW: Ano ang nararamdaman mo kapag ganitong pinaguusapan natin ang tatay mo? (What do you feel when we talk about your father like this.)

Tinio: Wala po, naaalala ko siya. (Nothing, I remember him.)

CW: Para sa iyo, ano ba ang kamatayan? (What does death mean for you?)

Tinio: Yung kinuha na siya. Para ba yun ang araw ng pagbawi ng buhay niya. (It is day when he is taken. It is like it is the day when his life is returned.)

CW: Sino ang kumuha sa kanya? Sino ang nagbawi ng buhay niya? (Who takes him? Who takes his life back?)

Tinio: Sabi nila ang Diyos! (They say God!)

CW: Eh, ikaw, sino sa palagay mo? Ano ang paniniwala mo? (What do you think? What do you believe?)

Tinio: Disgrasya lang po 'yon, dahil hindi naman niya alam 'yon dahil po kung ano man iyon, hindi sa ganoong paraan siya kukunin. (It is just an accident. He didn't know how he would be taken.)



CW: Papaano kaya? (How?)

Tinio: Patatagalin pa siya, hindi ganoong biglaan. Talaga pong disgrasya lang iyon. (He could have lived longer, not so suddenly. It was just an accident.)

CW: Yung mga kapatid mo, paano nila tinanggap ang pagkamatay ng tatay mo? (Your brothers and sisters how do they accept his death?)

Tinio: Umiyak sila at gusto nilang puntahan ang lugar na namatay siya. Nang makita naman namin si Papa ko, parang buhay pa po! Parang humihinga siya. (They cry because they want to go to the place where he died. We saw him it was as if he was alive, like he was breathing.)

CW: Yung mga binilin sa iyo, anong tingin mo dito, ikaw ba talaga ang tatayo bilang tatay? Hindi ka ba nabibigatan sa iniwan sa iyo ng tatay mo? (The things your father wanted you to do, are you really going to be like the father of the family? Isn't that responsibility too big for you?)

Tinio: Kaya ko naman bantayan ang mga kapatid ko kasi po nagsanay na rin ako - nasanay na akong magbantay sa kanila. Kayang-kaya ko na po 'yon. Ang mabibigat na trabaho, 'pag hindi ko kaya, nagpapatulong na lang ako. (I can watch my brothers and I'm used to the task. I can easily do it. When the task becomes too difficult, I will ask for help.)

Compulsive care-giving and self-reliance is how Bowlby (1980) would describe Tinio's behavior. The account of Tinio reveals how a child of ten had been forced to take on the responsibilities of his deceased father instead of expecting to be cared for and protected himself. After what he had internalized while his father was still alive - that of taking care of his mother and siblings as soon as his father dies - he began to believe that indeed, his mother and siblings would have no one else to lean on except himself, and so, he had to be strong and brave for them. Hence, he had no time to mourn his father.

Looking at the relationship of Tinio with his mother, one could say that he was really closer in a lot of ways to his father. For one thing, since his father's death, the mother had really left most of the responsibilities of looking out for her other children to Tinio. Because she had to look for a job, she was out of the house often. Tinio had to carry-on with the house chores, he had to cook and feed his brothers, he had to be the perfect example to them all the time. He never allowed himself to make mistakes in the process for he always felt he would have failed his father. In effect, he never had the parental attention which he enjoyed from his father while he was alive, from his mother. She began to feel confident that he could do without it.

Bowlby (1980) in his discussion of mourning of children says that it is in these cases where a child has lost all effective parenting that, instead of his being sad and longing for love and support himself, becomes intensely concerned about the sadness and needs of others and feels impelled to do all in his power to help and support them. In this way, the cared-for person comes to stand vicariously for the one giving the care.

Tinio's situation can be looked at also in another way. Simos (1979) calls this particular behavior as a manifestation of unconscious guilt. Tinio was always confronted by his father with the need to be strong and brave for his mother and his brothers. He began to think that to express sadness was a sign of weakness and to ask for nurturance and security from his mother was going back on his word to his father. At the same time, having been closest to his father, he may have thought he was in a position to prevent his death. With all these in his mind, guilt and shame would be natural emotions set off by the loss of his father. In such instances, it is very important for him to hear that one can be strong while feeling deeply about the loss of a loved one, and that confusion and disorganization in the face of loss is not a sign of incompetency. More importantly, dependency in the crisis of grief need not mean permanent regression and running away from responsibility.

In the six-month period that Tinio has been attending group therapy sessions at the center, he has improved a lot in his relations with other children. The group dynamics activities have helped him to let go of the child in him which has long wanted to break loose. The exercise on emotions has helped him understand and relate with his feelings about his father's loss. In one of the sharing sessions where the children were asked to say something which they remember of their parents, Tinio broke out in tears as he remembered his father's birthday. The most important yet most difficult task that the caseworker has yet to do is to make the mother realize that her oldest child needs her attention. She realized that unless she starts taking on the responsibility of taking care of her family, Tinio, being a child will always be bound to feel guilty and ashamed of failing not only in this task but his other tasks as well. Having been burdened with adult responsibilities at a very young age, he may turn into a helpless adult with a very low self-esteem.

Another common reaction to death of a loved one is aggression and destructive outbursts. While a remaining parent has no difficulty recognizing that sadness is a normal response to loss, this over activity and aggression is much more difficult to understand. Let us look at the case of Laya.

LAYA: (Alone and angry)



Laya is the second child in a brood of three. She was five when she saw her father gunned down in their house. Her mother was not around at the time of the incident, in fact, it was only three months after the incident that Laya saw her mother. Their reunion was not as her mother expected because Laya lashed out in anger and said things which made the mother lose her cool so that she slapped the child in return. Since then, Laya has refused to live with her mother. In the few times that they have encountered each other, Laya has threatened her mother with a knife if she dared touch her.

Laya was specially attached to her father, so that when he died, she blamed him for leaving her with a mother she was never close to. Laya's mother was usually in the province. Her work would take her away from the family for long periods of time and she would see her children very rarely. Care for the children was provided by the father and other relatives whom the child eventually considered more significant than the mother. Laya always felt that among the three children, she was the least loved by her mother. This was always verbalized by the child in her conversations with her aunts. She then found satisfaction in her relationship with her father. She couldn't even talk of being close to her siblings. On the day that she witnessed her father die, she was with her younger brother inside their house when a burst of gunfire ensued. She saw her father hit and she would not leave his side. But he ordered her to leave him and crawl with her brother outside the house and run to their neighbor's house to seek cover.

During her father's wake until he was buried, the children were not allowed to see him for the last time, for security reasons. The children were then, under the care of an aunt. Unlike her siblings, Laya was the most difficult to deal with at this time. According to her aunt, she would lock herself in the room and refuse to talk to anybody. On several occasions, she would be seen lying or sitting on the bed staring at a far distance or up the ceiling with tears rolling down her cheeks. She was the only one who was not happy to see their mother during her first visit. In fact she reproached her for her long absence specially at the death of her father.

Laya was adamant about staying with her aunt while her siblings went home with their mother. The mother tried and insisted on bringing her home, but their conversations would end in a fight and Laya would stay with her aunt and grandmother. It had come to a point that the mother was suspicious of her husband's relatives. She suspected that they encouraged Laya's refusal to live with her. Until one serious fight between mother and daughter ensued, when Laya threatened her mother with a knife, the family decided to come to the center for help.

Through various play therapy sessions, it was confirmed that Laya really had a closer attachment to her father and would rather not talk about her mother. Being with her father at the

time of his death, she blamed herself for not being able to do anything to save him. At the same time, she expressed anger towards him because he had left her alone. Her sense of aloneness was brought about as a result of her feelings towards her mother. Just like Pedro, in the first case discussion, Laya sought for an emotional model. The experience of losing a loved one was something new and much too difficult for her to handle, specially as she was losing her only attachment figure. Even if she wasn't close to her mother, Laya was hoping that she would be able to provide this support and now really be a parent who would give them love and care in the absence of their father.

But this expectation was not met. In fact, the children had to wait for three months before they could see the mother. It wasn't her choice. It was rather difficult for her to be seen in public as she was another target next to her husband. Unfortunately, neither Laya nor the rest of the kids knew about this. For Laya, what was clear from the beginning was that her mother did not seem to care that her father had died, that she had not seen her grieve or show any emotional sign of grief over the loss of her husband.

Things got even more complicated when after a year, Laya heard from her mother's friends that her mother was now entertaining a suitor. This further reinforced Laya's belief that her mother did not love her father because she was ready to find him a replacement. Laya could not take this. Although she has now worked out her anger with her father because she has found comfort in living with her grandmother and aunts, she has a long way to go in dealing with her anger towards her mother. What makes things doubly hard in this matter is that even the mother is not that willing to work towards winning her daughter back. She considers this kind of behavior wayward and thus should be punished. Her idea of punishment is the withdrawal of her love. What we have here now is a vicious cycle which can only be broken if and when the mother decides to face the fact that the aggressive behavior that her daughter is exhibiting is a normal part of the grieving process but if neglected and further misunderstood could take on a pathological course.

#### IV. ANALYSES AND CONCLUSIONS

The present war situation in the Philippines continues to put children and youth in a marginal status as their emotional and psychological as well as physical well-being are threatened. Even before the actual crisis situation of death occurs in the family, the child already is exposed to the threats and changes in his life which constitute what we might call small crises. These small crises, however, when left unexplained and unresolved leave the child helpless and much too confused to go on with his life in a healthy and normal manner. He can not be the regular kid on the street because he has the security status of his family to consider all the time. How then, do we help



save this child from being a maladaptive, anti-social and emotionally handicapped adult?

In a study conducted by the Children's Rehabilitation Center on the psychological help given to children victims of the political-armed conflict (1986), it was noted that it is not so much the fact of war that causes the emotional and psychological trauma of the children, rather, it is the breakdown of the family system that leaves the child feeling helpless and unable to move on. It is with this frame of mind that I feel, an analysis of the above discussions be made.

Bowlby (1980) in his discussions on attachment, separation and loss spoke of three variables which influence the course that mourning or grieving takes place. The first is the cause and circumstance of death. I would like to think that this involves very much of the cognitive capabilities of the child to understand the experience of death by being provided the different opportunities to express grief.

The chronological and mental age of the child is critical as this determines the ability of the child to work from his perceptual knowledge of the experience to a more abstract and conceptual understanding of this new life situation. A child can be expected to respond to death with a degree of realism only if he is given true information and the sympathy and support to hear it. This means taking care that the child understands that death is real and final. Specially in the case of children under 7 or 8 years old, who tend to believe that their own thoughts, actions and wishes cause what happen to themselves and to other people, it is important that they are given the attention they require to prevent the onset of feelings of guilt and shame.

Loss of a parent to death strikes a blow to a child's developing sense of trust and self-esteem, causing feelings of powerlessness and guilt. In other words, the rule is: Be completely honest. Answer the child's questions accurately. It is during these instances that one has to allay the child's fears that some information is being withdrawn from him, specially as his sense of trust has been badly shaken. The task of the therapist at this time is to allow the child to understand and figure out what has happened himself, to make it real again and again by allowing him to ask questions and encouraging him to remember and talk about the deceased person and strengthening positive memories about this person.

The second variable posited by Bowlby is what I would consider of affective value for the child. This is the pattern of relationship between the deceased parent, the remaining parent, and the child prior to the experience of loss. Attachment is defined by Bowlby as the ready accessibility rather than actual and immediate presence of a significant adult-the willingness to respond and act as comforter and protector. In this light, we can say that when a child is confident about his

attachment figure, he is less prone to intense or chronic fear because his confidence in the availability of an attachment figure was built up slowly during his earlier years and his actual experience has taught him that he can depend on this figure. It is important to note that the younger the child, the greater reliance on the presence of the attachment figure.

As the child gets older, availability becomes the dominant variable. In the same context, confidence over an attachment figure is dependent on two variables and these are: whether this figure is judged to be the sort of person to offer protection and security and whether the self is judged to be the sort of person towards whom anyone is likely to respond. These factors are specially critical to the likes of Maria and Laya whose cases were presented earlier.

The third variable is very much related to the second one. In fact, if there is a breakdown in the second variable, this last one will surely suffer unless a substitute figure is provided for the child. The family members' response to the loss specially the significant figures to the child; the dynamics of the family after the loss and the support systems available to the child constitute the third variable. We think that this is a combination of both the cognitive and affective states of the child which will aid him in getting over the loss of his loved one.

At the loss of a loved one, the adult also has to cope with the anguish of abandonment and probably of guilt about much that has or has not been done or felt in relation to the deceased. Just like the child, he has to learn to hold the death internally during the mourning process until he feels sufficiently separate to accept, endure and survive the reality of the loss. This was what was significantly lacking in Pedro's mother in the first case presented. Hence, the difficulty in dealing with her children.

On the part of the children, it was easy to adjust as soon as they knew all the facts because they had a very good relationship with their father prior to loss. Bowlby explains that it is only when the lost person has been internalized and has become a part of the bereaved that the mourning process is completed and adjustments to a new life can be made. Once the task of internalizing has been achieved, the dependence on the external presence is diminished and the bereaved child becomes able to draw on memories, happy or unhappy, and to share these with others, making it possible to talk, think or feel about the dead person.

Pincus reiterates the point that grief is the normal response to death of a loved one. It is of fundamental importance to work through the mourning or grief process and for it to be completed without harmful interference and repression. Unresolved grief leads to defenses against emotional commitment,



a denial of feelings and an impoverishment of the personality. The urgent need is to relive experiences of earlier attachments and losses in order to be free for new and realistic relationships. The bereaved child has to understand and modify the ongoing interaction between himself and the internalized death. He has to accept the reality of loss and hold inside himself the memory of his lost loved one.

Family environment indeed plays a major role in facilitating a child's handling of any life crisis. His personality is a product of all his interactions with his attachment figures. With a good family support system, the child grows up to be confident and he internalizes the "good" in his significant adults as a result of which he is able to tackle problems and stressful situations effectively. On the other hand, an unsupportive home where the child does not gain confidence on the availability and dependability of people, learns to respond either with fear or aggression.

I would like to summarize the above-presented data and discussions in this model which I will present. This briefly shows how the dynamics of attachment and the cognitive abilities of a child affect his understanding and coping with the experience of death.

The results of this study can be extended to include the plight of those children whose parents are still missing. The long-time absence of their parents or one of their parents results in much the same way as if they were really dead. Further studies regarding this type of coping behavior in the children is called for.

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## REFLECTIONS

I say goodbye to my children,  
 "Are you leaving again, Nanay?"  
 My teary eyed boy would ask,  
 "Won't you stay to play?  
     to sing  
     to be with me awhile?"

"Anak, I have work to do,  
 So many people to meet,  
 So many places to go.  
 But I will be home as soon as I can"

But the evening draws so fast  
 And when I return the children are already asleep.

The next day, I say goodbye to my children,  
 "Can you not stay for the day, Nanay?"  
 "Can you not come home a little earlier?"

Again, I say goodbye to my children,  
 "Are you leaving again, Nanay?"  
 My teary eyed boy asked,  
 "Won't you stay to play?  
     to sing  
     to be with me awhile?"

And I am tempted to stay.  
 But what if like their father, I don't come home at all?  
 Though I have been a poor mother to my children,  
 Who shall be mother to them when I am gone?

Anak

Ano nga kaya ang mga tanong?  
Anak, ano ang batayan ng buhay?

Kung ako'y nanglilimahid sa dumi at pawis  
Kung ako'y kuba na sa paghahanapbuhay  
Kung abo'y baon sa utang na hindi mababayaran  
Anak, ano ang batayan ng buhay?

Kasalanan ko ba ang kahirapan?  
Nagsumikap naman ako para kayo ay hindi magkulang,  
Pangarap ko para sa inyo'y buhay na may karangalan  
Kabanalan na kalakip sa gawa pang-araw-araw.

Anak, bakit mo ako iniwan,  
Nagpaalila ka sa ibang bayan  
Itanong mo kung ikaw ay minahal,  
Nang higit pa sa aking buhay  
Pagkaing isusubo ko na  
Sa iyo'y ibinibigay pa.

Anak, ano ang mga tanong?  
Ikaw na itinaguyod at nakapag-aral  
Ano ang batayan ng buhay?

*What are the questions, my child?*

*What are the questions, my child?  
What is the meaning of life?*

*If I am wallowing in grime and dirt  
If I have been crippled by hardwork,  
If I am buried in debt that cannot be repaid  
My child, what is life for?*

*Is poverty a sin?  
I have worked so hard to provide for your needs.  
I have dreamed of an honorable life  
Dignity in your work and spirituality in your choices.*

*When I cowered in fear, did I err?  
Did I compromise when I should have fought?  
Didn't I love you more than life itself?  
My child what are the questions?*

*Why have you abandoned me?  
Why do you sell yourself into slavery?  
What is the meaning of life?*



ON UNDERSTANDING  
THE DYNAMICS OF AGGRESSION \*

*Healing comes from loving and caring.  
Our strength lies in gentleness.*

I. INTRODUCTION

There is a lot of aggression and violence in our midst these days. In the political arena, there is the continuing battle between and among the national armed forces and its paramilitary arm and the rebel groups. And while the adults constitute the greater majority of those involved in such activities, where there are adults, there will always be children. Everyday as adults are killed or maimed by the senseless armed struggle, Filipino children are exposed to varying degrees of arbitrary violence and aggression. What we see is merely the tip of the iceberg as everyday families are exposed to crisis, and adjustment is stretched to the maximum. Many victims of such crisis are silent. And every child-loving individual is bound to ask: How much of this can our children take?

Unfortunately the very poor are the helpless victims of such a struggle, those who have already suffered from the oppression brought about by the greed of a very few in society do not have the resources to cope with the added strain of survival in such a situation. Lacking in resources both family and individual are constrained to cope under the most difficult of circumstances. Often we see the survival adjustments as identification with the aggressors, at other times we view the prevalent suspiciousness as a necessary survival mechanism. And the prevalent abandonment of family and children<sup>1</sup> that husbands cannot support as a way of escaping from facing responsibilities that cannot be met. Mothers and children are oftentimes left to fend for themselves as husbands become victims of the armed struggle.

As the struggle proceeds there is a growing population of children who have known nothing but violence and aggression. The nation is facing an angry youth that has not known love and gentleness, caring and compassion. We face a future generation of bitterness and hatred that must be assuaged.

The Children's Rehabilitation Center posits. "Do we love our children? Exposure to violence will have far-reaching effects on the children. As adults, such children will most likely commit the same acts of violence against the next generation." In the face of such a future we are constrained to find a way to teach love and gentleness, caring and compassion. Can it be done?

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\* Draft Prepared By Ma. Elisa Esguerra, March, 1988, for a paper in Personality Theory. Jasmin Acuna expanded the theoretical framework and provided the socio-cultural context in which therapy is being conducted.

<sup>1</sup> Acuna's observations of domestic violence is based on two years work with women and children in slums of Metro Manila.

But how do you teach a child to be peace-loving and gentle if he is growing up in a community where people are constantly at each other's throats, fighting and killing each other? When his parents are always on the run to keep themselves and their families safe, how can parents maintain security and safety for their children to grow trusting that man is basically good and life is a source of joy? What if the child has been himself a victim of such senseless violence?

In this paper, we hope to provide a glimpse of hope for all the millions of Filipino children who are in crisis simply because they are helpless, vulnerable victims of their own society. It does not include the unknown victims of the countless incidents of family violence. By going through the various theories and models of aggression, we hope to be able to shift through the various antecedent determinants of aggression, so that in the process, we can isolate the factors which can help reverse the process of modeling, reinforcing and perpetuating aggressive tendencies in children.

We will be presenting some vignettes of therapy work being undertaken by the Children's Rehabilitation Center with children- victims of the political-armed conflict in the Philippines. In this way we shall be presenting a microcosm of Philippine society as our children have lived it, as they see it through their experiences.

It may be important to note even at the start that instrumental aggression is more common among these children - more specifically aggressive behavior as a way of coping with everyday crises related to their traumatic experiences. One child exhibits his aggression in a play/art therapy session over crayons, papers and peg boards. Another child spins a cat by its tail and throws it into a bucket in a fit of boredom, another attacks a rag doll in fantasy play. An older child when asked to be discriminating about his choice of television shows, asks the difference between violence on TV and the violence which has become a way of life for him in the country sides of the Visayas.

## II. BACKGROUND

A lot of studies have been made on aggression as a personality variable so that as early as the mid-fifties, social psychologists have been postulating various theories regarding the antecedents and dynamics of aggressive behavior.

Probability of occurrence of aggressive behavior has been associated with two main factors. One important factor was frustration derived from the Miller and Dollard formulation. Berkowitz (1962) noted however, that there is a certain intervening variable necessary for actual aggression to result from frustration - that is, the emotional response of anger. In other words, aggressive behavior is not directly a function of frustration alone, but of certain cognitive judgments of the stimulus situation. Buss (1961) completed the Berkowitz formulation when he came up with the idea of the instrumental value of aggression. Some aggressive behavior may be engaged in merely for the rewards of the response. It may be devoid of frustrating antecedents of thwarted goal



responses and devoid of emotional anger and are performed merely for its own rewards.

Acuna (1969) proposed a model on the dynamics of aggression with emphasis on the cognitive factors determining the responses to a frustrating circumstance. This is based on the postulated interaction among the strength of present instigation, the perceived behavioral consequences and the availability of the target. This is congruent with Berkowitz formulation regarding the interpretation of the stimulus situation and the tendency to aggress.

Cognition is not devoid of other determinants. Past experiences may affect the individual's perception of environment so that certain stimulus cues may be perceived as appropriate instances for the expression of aggressive responses. Child-rearing practices and aggressive models may compound this variable. Punitive parents are models of aggressive behavior that increases the probability of aggressive responding to stressful situations. In the same way, punishment may also affect the overall inhibition felt toward aggressive responding in general (Acuna, 1969).

There are no statistics on family violence and child abuse that has been observed in Filipino families at all levels. In a society dominated by male chauvinistic behavior, wife abuse—actual physical violence or psychological, has been something very few professionals mention openly. Misogynist relationships among men and women have been perpetuated by a silence—silence, that is perpetuated by the attendant guilt in the victim that somehow one has deserved or elicited the physical punishment. We have observed in our work with deprived urban and rural women that this is an important area affecting our work with children. In such a macho culture, children are exposed early to violations of human rights without even recognizing these as problems within the families. The final authority rests with the father and the mother is left with the difficult problem of maintaining family peace by keeping quiet. Together with drinking and gambling which are common in these areas, wife beating and child abuse are also common (Acuna, 1988).

Certain beliefs have been identified as perpetuating these aggressive patterns. The first is that children are extensions of their parents whatever the parents do is thereby right.

"Anak lamang kita. Kahit ano ang aking gawin ay maaari kong gawin sa iyo" (You are only my child. I can do what I want to do with you.)

The second is the belief that parents know what is best.

"Sundin mo ako dahil alam ko ang mabuti para sa iyo." (Obey me because I know what is best for you.)

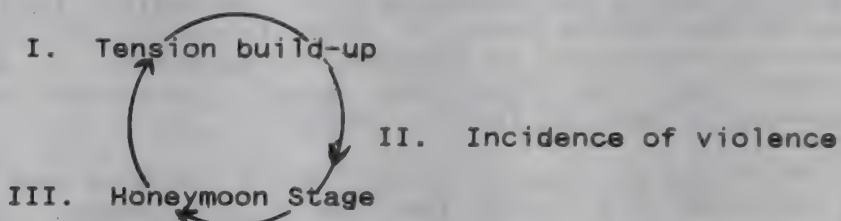
The assumption in the first belief is that children have no basic rights that even parents need to respect. The assumption in the second belief is that parents cannot make a mistake. Theirs is the final authority that the child needs to follow.

In situations where the parents are themselves stressed and rely on alcohol and gambling as ways of coping with problems as observed in these

deprived communities, their judgment is based on fear and insecurity. These same parents are likely to assert their will on their families using force instead of reason.

Unfortunately family violence perpetuates itself as a cycle. With the cycle getting shorter and shorter as time goes on. After an incident of violence there is a honeymoon stage where the father or husband would be contrite, but we expect that as frustration and tension rises another incident is forth coming. Breaking the cycle is the difficult task of psychotherapy with the whole family. And keeping the wife and children from the reach of such violent men is the initial step to safeguarding their lives.

-----Diagram of the Phases of  
the Cycle of Domestic Violence-----



Usually such a man has been himself a victim of severe punishment or aggression, either in the home or by society itself. It is not surprising that violence against his loved ones is preceded by drunken bouts<sup>2</sup> where he loses self-control. Neither, is it surprising that once in a while we come across parents who were former prisoners using very severe disciplinary measures with their children. Such as tying up the child by his feet and placing him in a sack cloth, because he took money from his parents without permission<sup>3</sup>. Where did they learn such forms of punishment? And why would they use this with their own children?

Cases such as these leads us to a better understanding of the desperation and hopelessness that can accompany oppression or adjusting to oppressive situations. It also provides us with a glimpse of the future unless we exert concerted efforts at rehabilitating those who have suffered.

On the other hand, foreign literature exists to describe the role of parents in developing criminality. McCord and McCord (1958) came up with a study on the effect of parental role on criminality. In a four-year longitudinal study Dr. Richard Clark Cabot showed that in Massachusetts 250 seven-year-old boys were more aggressive when their parents were also more punitive. Criminality was defined as a state of being convicted at least once for a crime involving theft, violence, drunkenness or sexual assault. McCord noted three critical factors which relate very well with Acuna's model. The three factors defined by McCord are: (1) the

<sup>2</sup> As reported by women victims of their husbands' drunken bouts where wife beating or child beating incidents have occurred.

<sup>3</sup> This incident was taken from a case at CRC.



### 31 aggression

emotional relationship between parent and child; (2) attitudes of parents toward their children, whether they are warm, passive or rejecting with their children; (3) methods of discipline which are regarded as mediators between parental values and children's learned behavior. We talk of consistently or erratically punitive, consistently or erratically love-oriented and lax methods of discipline.

It may be good to note the differences in labels based on context at this point. Not all aggressive behavior is criminal in nature. This is to say that aggression is a variable which is normative and culturally defined. While aggression in this particular study is brought to its extreme form, criminality; aggression is simply defined as an act of bringing injury to self, other persons or properties which may or may not lead to criminality.

The following conclusions can summarize the findings of the studies reviewed: (1) Children imitate their father's criminality when other environmental conditions (paternal rejection, absence of maternal warmth and inconsistent discipline) exist to produce an unstable aggressive personality. (2) Rejection by the father creates aggressive tendencies in the child who, having witnessed a criminal model in childhood, tends to channel aggression into criminal activities. (3) Parents' conscious values can affect the child's behavior if these values are impressed upon the child by consistent discipline. Even if the actual behavior of the parent contradicted his conscious values, the consistently disciplined son tended more often to follow the expressed values, instead of the behavior of the parent. This finding opposes those who maintain that children will follow their parents' values only if the parents' actions reinforce these values.

An important factor in the regulation of aggressive behavior is the anticipation of punishment. Anticipation of punishment merely makes the aggressor choose his targets well. Those who cannot retaliate, the weak who are dependent on him, these people become easy targets for his aggressive impulses. This is very much related to child-rearing patterns and methods of discipline. Skolnick (1980) in her article on the Myth of the Vulnerable Child states that there is a correlation between severe punishment and child's aggressiveness, often taken to show that harsh discipline produces aggressive children. Mussen (1980) in a study on socialization focused on how close supervision, high demands for obedience and personal neatness and pressure upon the child to share in household responsibilities are associated with responsible and non-aggressive behavior. It is important to note that Mussen's study stresses the same points raised by McCord. He states that the conditions most conducive to anti-social aggression are probably those in which parent is punitive and arbitrary in demands, but inconsistent in responding to child's disobedience.

Related to anticipation of punishment is the matter of conformity and the need for approval. Approval-oriented persons employ repressive defenses to protect and enhance self-esteem. Certainly, the problem of aggression and its control is a salient one in our culture and those who transgress society's categorical imperatives concerning aggression are

liable to ostracism and alienation. Hence, the use of passive and indirect forms of aggression.

The last factor mentioned by Acuna (1969) in her model is the target of aggression. Neal Miller (1948) perceived the target to be usually the perceived source of aggression. But not always. Berkowitz felt that self-aggression results when the self is perceived as the source of aggression or frustration. On the other hand, Miller felt that self-aggression arises when all alternative modes of aggressive responses have been blocked-off by fear of punishment. Acuna's formulation seems correct when she says in instances where self-aggression occurs, the self is not always perceived as the source of frustration, the purpose here is sometimes not so much to injure oneself, as it is to hurt or to get the attention of those who are supposed to be caring for him. In a lot of ways, this is aggression used as an attention-seeking mechanism or a coping behavior where there is perceived rejection.

Feshbach (1964) came out with his drive reduction theory stating that drive reduction is the chief reinforcing event which increases the probability of future occurrences of aggressive behavior. As soon as the aggressive act is done, there is an accompanying drop in emotional arousal-whether rage or anger-and so a diminished aggressive drive. However, the very lowering of the drive level reinforces the aggressive behavior which has occurred. This brings us to another point of Feshbach regarding aggressive fantasies. If aggressive fantasies can lower aggressive drive, then instigation to aggression is lowered and acts of imagination present at the time of drive reduction are those which are reinforced.

Taking Bandura and Walters (1963) learning theory, it states that behaviors which cause injury to others are learned in the same way that other behaviors are. They first arise as a function of observational learning, imitation, trial and error or rather random activity and become frequent or probable if they are reinforced. There is also the view that tends to treat certain components of aggression as relatively innate but concentrate on the role of learning, chiefly imitation and reinforcement as a determiner of WHEN, WHERE, and HOW frequently such behavioral components occur in sequences of behavior involving injury to others.

If we were to put together all the above formulations regarding aggression as basically normative and culturally defined, that acts of aggression are frowned upon by society--and then look into the various antecedent determinants that have so far been explored like child-rearing practices, models, methods of discipline, drive reduction, learning and instinct theories, where do we find ourselves? What is the prognosis for our children who at present are exposed to a lot of aggression and violence?

Marcelino (1985) came out with a study on the stress and coping mechanisms of children of political prisoners in the Philippines. In her study, she mentioned aggression as a method of coping common among the children. Prevalent forms included physical aggression directed toward peers and animals which usually start from rough play. Pinching,



### 33 aggression

...kicking, boxing, throwing of things and animals (dog, cat, etc.),  
...biting, toy mutilation, over expression of affection to the  
...nt of squashing the other person are more particular examples of  
...les of aggressive behavior exhibited by the children in the detention  
...ter. Among the older children, verbal aggression was more common-the  
...ndency to answer back and argue with adults and use foul language with  
...ers.

#### I. SOME CASES OF AGGRESSION IN OUR CHILDREN

##### DO: Aggression as attention seeking

Indo is a 4 year old son of an ex-political detainee who at 1 1/2  
years old was placed in an isolation cell with his mother for three  
weeks. While inside the detention center, Indo exhibited aggressive  
behavior in various forms-rough play, spitting, biting, toy mutilation  
and others which made his presence really aversive not only to other  
children but to the adults as well. Under the care of the Children's  
Rehabilitation Center, Indo was observed to have high energy levels  
while having no constructive outlets for these. Hence, the child found  
his own outlet through aggressive behavior which gained for him the  
attention of everyone. Following is an excerpt of a particular play  
therapy session with Indo:

Indo was given pieces of paper, a can of crayons and a peg board.  
First, he got hold of the peg board and started pounding on it. Later  
on, he got hold of the can of crayons and turned it over on the floor.  
Finding that there was no red crayon, he asked the therapist for help.  
When asked what he wanted to do he said, he wanted to make a puppet. The  
therapist presented him with another box of crayons and so he started  
drawing a figure of a person on the piece of paper. As soon as he  
finished with all the parts of the puppet, he started messing up its  
face with dark crayon lines...

Therapist: O Bakit mo ginaganyan? (Why  
did you do that?)

Indo: Galit ako, eh! (I am angry, he said while making  
lines on the paper to cross the face of the puppet he has just  
drawn.)

Therapist: Galit ka? Bakit ka galit? (Why  
are you angry?)

Indo: Galit ako! (I am angry he asserted, while stabbing at  
the puppet with his crayon.)

Therapist: Ngayon, sinasaksak mo ang puppet? (Now,  
you struck the puppet.)

Indo: Saksak! Saksak! Ha-ha-ha! (He got the other paper and  
messaged up the puppet once more)

Later on, he went back to the peg board and inserted some crayons  
into its holes. Then he rode on the peg board as if riding a car and  
moved around until he stopped in front of the therapist...

Therapist: Nakasakay ka sa kotse! (You  
are riding the car!)

34 aggression

Indo: Oo. Vroom,vroom. (yes, vroom, vroom)

Therapist: Eh, ano ito? (What is this? pointing at the crayons inserted into the holes of the peg board)

Indo: Pako. Pupukpuhin ko! (They are nails I am pounding!)

Therapist: Ah, pupukpuhin mo ang pako. (You are pounding the nails.)

Indo: Papatayin ko! Sasaksakin ko! (I will kill and I will strike it with a knife!)

Therapist: Sasaksakin mo ang pako? (You will strike the nails with a knife?)

Indo: Hindi ang pako! (no not the nails!)

Therapist: Eh, ano o sino ang sasaksakin mo? (Who then?)

Indo: Wala. Masusunog itong kotse at masusunog rin siya (Nothing. The car will burn and he will burn.)

Therapist: Sino ang masusunog? (Who will burn?)

Indo: Wala. Ha-ha-ha. vroom, vroom. (No one.) He now pretends to ride the peg board like a car while he picks up the crayons and breaks them into small pieces and then bursts in laughter.)

Indo was observed to be consistently aggressive inside the detention center. But after he was released with his mother his aggression even increased. Some factors were identified by the therapist to be related to his aggressive pattern. Chief among these factors was the kind of discipline the mother and the many significant adults of the child in the detention center used with the child. It seemed that the child did not have a consistent role model. When he got into trouble with one adult he could ease his way out of the situation by going to another adult. Since the mother was preoccupied with the whereabouts of her missing husband the child was not the center of her attention. As a result of these conditions, the child did whatever he felt like doing. Unfortunately, it was the aggressive behavior which earned him everyone's attention. He was not rewarded for good behavior, but he was attended to when he was disruptive and it was still better than getting no attention at all.

The goal of therapy for Indo is to make him aware of the effects of his aggression on others. The goal for the mother is to give Indo attention for good behavior and to increase their interactions that are not discipline oriented.

At the Children's Rehabilitation Center, the mother was encouraged to provide the child with productive activities through which he could use up most of his energy. At the same time, the mother was asked to join these activities so that there would be more parent-child interaction specially as Indo is fast growing up and looking for a father-figure/role model. (Indo's father has been missing since their arrest 3 years ago.)



### 35 aggression

At present, Indo is a much more pleasant boy. After two and a half years of consistent and intensive sessions at the CRC, he exhibits nurturing and caring behavior for smaller children. From time to time, he gets carried away with his expressions of affection so that he forgets not to squash his objects of affection and thus, hurt them. But now, he is conscious of guilt feelings after he has hurt someone. As mentioned earlier, Indo puts a big premium on being accepted by his peers and other adults. Much more work, however, is needed in order to provide Indo with the interest to join in the group activities at the center.

#### CALOY: Displaced Aggression

Both father and mother of Caloy were once political detainees. Caloy was then five years old when he was observed by one of the therapists at the CRC to exhibit aggressive behavior. During one of the play sessions, Caloy was unobtrusively observed picking up one rag doll after another from the toy cabinet, pounding, hitting and smashing it against the walls until they fell apart. Caloy was then observed at play with his peers and sure enough, such aggressive tendencies found expression in rough play-pushing, kicking, and boxing his playmates.

Closer investigation of Caloy's problem brought us to the methods of discipline employed by his parents. Work demands made it impossible for his parents to attend to his needs all the time. Caloy and his older sister were left in the care of aunts and grandparents. They were very strict disciplinarians. When the time came that the parents could take care of their children, they tended to overcompensate for their long-time absence. This meant allowing Caloy to do almost anything he wanted to do, until he got out of hand. But this cost him his popularity among his peers. Children at the center refused to play with him. The girls, specially, did not welcome his presence. Eventually Caloy found himself alone. It was at this critical point when he was observed venting his aggression on the rag dolls. It seems that he was able to internalize the alienation which resulted from his aggressive behavior which his peers found offensive. He was in effect punishing himself by being aggressive. Frustration and anger with himself were factors which probably contributed to his displaced aggression on the dolls. Having worked out this emotional arousal in a more socially acceptable manner, he was able to relate with the other children in a more wholesome manner.

#### ABEL: Aggression as a Exploratory Behavior

Abel is 13 years old. Probably thinking that he was not being watched, Abel sat under one of the trees at the center. He was staring at a distance and then he got up very slowly and ran after the cat. He caught the cat by its tail and flung it towards the tree. He seemed fascinated that the cat fell on all its fours. The cat, sensing that it could get hurt if it stayed with Abel, tried to run away, but Abel was too quick for it. This time, still holding the cat by the tail, Abel turned round and round and ran as if he were holding a kite in his hand and then he let go of the cat all of a sudden. The cat was hurled against an empty bucket. This time, Abel got hold of a splinter and looked at the cat while running after it. He got the cat by the tail

again and threw him into the bucket like a basketball. Then, he got his splinter and started poking at the cat while inside the bucket so that the cat was cornered. Eventually, the cat got out of the bucket and Abel ceased to run after it. The entire 10 minutes that Abel was doing this, he had a grin of satisfaction on his face as if what he was doing was a source of happiness.

Abel is what we would call a seasonal orphan at the CRC. He came to Manila as an internal refugee from the Visayas with his father. Shortly after a month in the evacuation center, Abel's father, together with the other adult male evacuees, were detained in prison on suspicion of being members of an urban rebel group. This left Abel all alone, except for the company of the other evacuees. This was the only time in his entire stay at the center that Abel was noted to exhibit this type of behavior.

To compound matters, Abel contracted chicken pox while at the CRC. Because of this, he had limited contact with the other children and he was advised to refrain from strenuous activities including travelling, so he was unable to visit his father for two weeks. It was at this particular time when he exhibited aggressive behavior toward the cat. The therapists were very surprised because Abel, being small for his age was always amiable and good-natured despite his separation from family and relatives. He was observed to be caring and attentive to the younger children of the other evacuees, and he was not an negative person. What caused Abel's aggressiveness toward the cat?

At the onset, we would say that boredom is the antecedent determinant of the aggressive behavior. Having nothing to do, being sick, seeking the company of friends and family, the child found happiness in simply playing with the cat. Who is to say that what he was doing with the cat was an act of aggression? On the other hand, one can also look at the situation in the context of the frustration-aggression formulation. Too many things are happening to him that he seems unable to control the situation, hence he is frustrated. The dissonance in this formulation however, lies in the fact that the emotion aroused by the situation was not one of anger but one of joy. This particular case would probably support Buss's theory of aggression, engaged in, for the simple rewards that the behavior brings.

TONY: Vicarious Aggression as a way of mastering his own violent experiences

Tony loves to watch television with the other kids at the CRC. He loves these cartoons of super heroes and these violent police and martial arts movies on TV. On one occasion, he overheard one of the staff psychologists at the center comment on the type of shows that the children are enjoying watching, to the effect that she wanted the foster parents to screen the shows. At this, Tony readily replied, "Bakit, Tita, mas grabe pa nga ang nakita ko sa probinsya. Wala namang diperensya yung masyadong magulong palabas sa mga karanagan ko." (Why, Tita, the things I saw in the province are worst than the TV shows. There is no difference between my experience and what they are showing.)



Tony is also a 13 year old orphan who grew up in the country sides of the Visayas. From the age of 3, he lived with his parents in the mountains fighting for their right to life in a very unstable and violent community. Tony would constantly be transferred from one caretaker to another, change his identity every so often to prevent being tracked down by the enemies. Tony saw how life was for his own parents until they both died in a bloody encounter when he was five years old.

Tony has been with the Children's Rehabilitation Center for over a year now. Within this span of time, he has not been observed to be physically aggressive, not even in play. But can be very verbally aggressive-in answering back adults, in using foul language with his peers, and when in a fit of anger-he would scream. What is the probability that he will be acting out all the violence that he has experienced in his lifetime and those that he enjoys watching on TV in the future?

Feshbach and Singer (1971) posited five theories regarding the influence of television and fantasy aggression on the actual expression of aggressive behavior. (1) Children learn from television just as they learn from any visual-auditory display. If a child is affectively aroused, fantasy activity reduces anger and level of arousal. (2) To the extent that children are rewarded through fantasy, behaviors other than aggressive acts are reinforced. (3) Violent scenes may provide fantasy material usable by the viewer. (4) Viewing violence may lead to a decrease in aggressive behavior through inhibition. (5) Fantasy aggression may provide the materials needed for cognitive control of behavior.

If we were to use this framework to analyze Tony's behavior, we would arrive at the following conclusions: (1) Tony has learned as much of the various forms of aggression in real life as he is getting from his favorite TV shows. He may actually be finding release of his pent-up anger over the death of his parents in the aggressive actions of his favorite TV characters. Because of this, he is physically non-aggressive. (2) Because he finds that he is emotionally relieved of his anger and fears every time his favorite TV characters are victorious over the villains, he not only looks forward to watching these same movies every time, but he hangs onto the images of these characters as sources of strength and reassurance every time he feels frustrated. (3) In relation to the second conclusion, Tony works on specific aggressive scenes where he imagines himself the aggressor and the victor. (4) After seeing too much violence in his younger years, not to mention the violence that he hears about at present, Tony may shun away from any form of aggressive behavior for fear of its repercussions. (5) By engaging in fantasy aggression, Tony is able to imagine the probable consequences of his behavior not only on himself but also on others. In so doing, he is able to assess whether his action will be beneficial to himself or to the other. His gentleness may be premised on this cognitive process. At work in this instance could be Piaget's theory of assimilation, accommodation and adaptation. Hopefully, by the time that Tony finishes off with this cognitive processing, the emotions aroused by the situation have already been curbed to a form of passive and socially

acceptable aggression like verbal or fantasy aggression which will not harm anyone.

#### IV. METHOD OF DIAGNOSIS AND THERAPY

As we have treated the personality variable of aggression, largely a product of social cognitions, we think that the cognitive-functional approach would work best as a basis for measurement. As we have presented earlier in the sample cases above, an examination of antecedents and consequents related to a given response repertoire-in this case, aggressive behavior- helps in identifying the function of the behavior for the individual. At the same time, we can use the child's cognitions to understand what his thinking processes are. In this way we can identify how his cognitions are contributing to or interfering with his behavior.

Aggression is something that is not easy to talk about. There is a tendency to give socially-desirable responses. Especially among children, there is that fear of punishment and a strong need for approval from adults. With these considerations, a projective test would be more apt to use with children in order to assess their tendency towards varying forms of aggression.

If one is lucky to have sophisticated equipment, video taping would prove very helpful not only for assessment of aggressive behavior but also as a feedback mechanism for reversing such forms of behavior. The therapist can get various footages of a child exhibiting aggressive behavior. This tape is then, played back with the child as audience. The child, then is made to see how he has acted, what resulted from his actions, and how other people reacted to his behavior. The therapist should then start to probe into the cognitive processes of the child at the time that the situation took place. The child could be asked to share his feelings and thoughts preceding, accompanying and following his aggressive act. This could help the child come to terms with his internal dialogue-that part of his problem results from what he says to himself and therefore, is not entirely outside of his control. Feedback to enhance awareness is still the best way of dealing with aggressive behavior in children. Being aware of the hurt it causes others is a good deterrent for further aggression.

Another method similar to the Thematic Apperception Test can be used following the principles of projective testing. By using a set of slides or pictures selected for a target population because there is a high pull for aggression we can ask children what they perceive to be happening in the picture, what the possible outcome could be, what the possible feelings and thoughts of the child in the picture would be and how this child in the picture would be better able to handle the situation. Of course, the topic of the pictures or slides would revolve around situations instigating aggression or violence. Again, the material borne from this investigation would give the therapist a glimpse of how aggressive a child can get and what forms of aggression the child is bound to use. The child's responses could make her more conscious of her internal dialogue. This may give the therapist information regarding the child's perceptions of his own roles and the roles of his significant



adults. These information are critical in identifying factors contributing to or interfering with the reinforcement of his aggressive behavior.

#### V. CONCLUSION

Herein, we have tried to present the various theories and formulations regarding aggression in the hope that its antecedent determinants can be isolated and studied further in the context of actual work with children.

From the data presented in this paper, we can arrive at some tentative generalizations that can be further verified in the Philippine context. Especially because we view aggression as a personality variable which is culturally defined.

Discipline that is too punitive is likely to reward the very behavior we seek to avoid. Transgression of rules and principles will be done behind our backs. Internalized self discipline will not develop. Sharing responsibility for younger brothers and sisters enhances the development of caring and compassion which are found to be strong deterrents to the use of force.

Family violence can be addressed in educating parents of children's rights. Children are in our safekeeping for the brief period in their lives when they are dependent on us. They are not properties, and we do not own them. Might does not make right. All civilized societies protect the young, the helpless, and the weak.

Except for the sample cases from the Children's Rehabilitation Center and the observations of family violence as a problem in deprived urban communities, all the studies presented in this paper were conducted in the Western context. Of the cases presented, it is very clear that further investigation regarding the other aspects of the aggressive tendencies of the children is needed. In fact, the suggested TAT-like method of assessment is being prepared as part of the therapeutic module being prepared for the children.

Several things are clear however: first, that aggressive behavior is a learned behavior and second that factors shape its persistence in a child's repertoire of behavior. Modeling and attention reward its expression. Cognitive processes affect its expression. For the children at the center, anger is not an important antecedent of aggressive behavior. We can conclude that anger does not always mediate the manifestation of aggression. Social conformity and the need for approval are possible deterrents in its expression. The individual is able to find other outlets for various forms of his aggression. Hence, we talk of passive, indirect or instrumental aggression which are carried out chiefly for the purpose of obtaining some other end; and active, direct and hostile aggression whose primary source of satisfaction is the injury done to another individual has not been observed.

The case observed seems to support Feshbach's fantasy aggression which is supposed to reduce a child's tendency to aggress as he masters

his violent experiences through fantasy play. But we don't know what the long term effects of such fantasy is as far as aggression is concerned. Since the child's reality is already more violent than the TV programs he watches, then vicariously he does not learn aggressive responding from the programs. The role of the violence on TV could be to increase his sense of control over the environment and reduce his feeling of being powerless in such a situation.

In the light of the present social crisis in the Philippines we believe that the more crucial elements for discussion are the support systems which will provide the necessary help to the child in understanding why there is so much violence and aggression in society at present. We think it would be good to reiterate McCord's postulated theory that even if the actual behavior of the adults contradicted the conscious values being taught to the child, the consistent methods of discipline helped to develop the expressed value and not the observed behavior of the adult.

This gives us some hope since most of us cannot be as patient as we would like to be, or as gentle as we would have preferred. Maybe just accepting our own shortcomings would be a big step towards facing the problem and the reality.

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The Christ I know came for the broken hearted  
He came to set the prisoners free.  
He came to mend and tend the suffering  
He came to show us the way to live in peace.

He lived among the sinners and those who have been rejected,  
He lived among the poor to give them a new hope,  
He came to teach us nature's way to find a new life,  
To build a new kingdom of the soul.

Where justice reigns, but laws are not needed.  
Where wars are won without the use of force.  
Where healing comes without medicines,  
Where living does not take from another's joy.

And when we finally meet the Father,  
And He asks us to account for our lives,  
We can thank God for the opportunity to serve  
There is no joy that isn't shared.



### Si Lola at si Cheche

Nakita ba ninyo si Lola ngayon?  
Walang matuluyan, walang kinabukasan  
Kay ganda ng apong walang tahanan  
Tanging aliw, tala, pagasa ng buhay.

Noong araw, may anak si Lolang inaasahan  
Naging biktima ng dahas sa rally sa lansangan  
Asawa'y nabaliw sa paghanap sa lalaki,  
Walang nakaaalam kung ano nga ang nangyari.

Walang patutunguhan inyong tulungan  
Maglola ay walang kinabukasan  
Bahid ng luha kaniyang pinupunasan  
Paglilimos hindi matutuhan.

Pagtitinda ng manika, natutuhan  
Nakabibili ng sabon, ngunit  
Kadalasan kulang pa para sa ulam  
Ngunit paglilimos hindi maatim,.

"Buhay ko ang bata; paano kung ako ay wala?"  
Ang ubo ni Lola hindi mapigilan  
Sa ilalim ng tulay, sa ilalim ng puno  
Lumilipas din ang magdamag na kay haba.

"Sino ang kukupkop? Sino ang magmamahal?  
Sino ang aaliw kung walang ligaya?  
Malupit na bukas, paano mababata  
Ng tanging alaala ng aming pamilya?"

Si Lola at si Cheche, hindi nagiisa  
Karaming naulila sa ating pakikibaka  
Kalayan ba ay sadyang hindi atin?  
Sino ang magdadala ng pangarap sa hinaharap?

Ilan pa, ilan pa ang alay sa mithin?  
Kalayan ba ay sadyang wala na?  
May buhay bang maligaya, kung alipin ng iba?  
Ano kapatid ang ating gagawin?  
Hindi ba't ikaw at ako ay iisa?

## STRESS AND COPING AMONG DISPLACED CHILDREN AND FAMILIES

The internal refugee problem in the Philippines dates back to the 17th century during the Spanish period when barrios situated more than two kilometers from parish churches were to be transferred and incorporated into the towns owned by the parish priests. During the American occupation, a proclamation was sent to Batangas and Samar ordering the villagers within a certain prescribed zone to leave their houses lest they be treated as public enemies.

Strategic hamletting cases increased under the repressive regime of deposed President Marcos. As a counter-insurgency measure against the growing forces of the rebel movement, it was first introduced in Davao del Norte in 1981. From 1981-1985, 56,972 families or 332,624 individuals were displaced because of forced evacuations and strategic hamletting. Sixty percent of the evacuees or 199,574 were below the age of 15.

For a government that vowed to protect human rights, the Aquino government seems to have much to prove. When President Aquino unsheathed the sword of war, violations of human rights increased to untold proportions even surpassing the statistics of the Marcos regime. It was during the time of Aquino when food blockades became a part of the military operations. Blocking the entry of medical and food supplies and services into farflung communities has been systematically used by government forces as a way of flushing out insurgents.

During the period January to December 1986, some 9,825 families or roughly 58,950 individuals have been displaced. 39,300 of these were children. From January to December 1987, the Task Force Detainees of the Philippines (TFDP) documented mass evacuation incidents involving 121,851 children from 30,447 families. In the first six months of 1988 alone, there were 41 incidents involving 35,360 children from some 8,840 families.

Displacement or evacuation refers to the voluntary or involuntary relocation or transfer of persons, families or communities from their permanent areas of residence to another area because of militarization. Other causes of displacements in the Philippine context have been multinational corporations' intrusions, agri-business ventures, developmental and infrastructure projects. It can happen in any of two forms: forced evacuation which is defined as the transfer of residence because of direct military orders due to counter-insurgency drives; a compulsion due to unexplained killings, abductions and harrassments by armed groups directly or indirectly connected with the military or strategic hamletting whose concept is to isolate the insurgents from the civilian communities who provide them with the material and political support by relocating them to evacuation centers for "safety".



## 45 displacement

About sixty percent of the people affected by forced evacuation are children. The long trips from their permanent homes to the evacuation centers, the unhealthy living conditions in these refugee centers, the undernourishment due to insufficient or unstable food supply, the lack of medical services, and psychological stress as a result of being exposed to uncertainty, threats and harrassments have strained the children's coping mechanisms physically and psychologically.

What does it mean to be a displaced or evacuated family? What does being an internal refugee entail?

Two families from our case files will probably illustrate the difficulties that displacement brings.

MANANG RINGDING, the mother

Manang Ringding is constantly short tempered. She is an evacuee, her husband has been detained, she is 5 months pregnant, her four children are chronically ill, they have no home, she is uncertain where her next meal or other necessities will come from. She carries the burden of the family by herself and she has a heart condition.

She has beliefs about raising children that interfere with healthy development of the child. For example, she believes that children need to be spanked in order to remember. If one talks to the child, most likely the lessons will not be retained. And when her children do not like to eat vegetables, soy sauce with rice is all she gives them.

She married very young, at the age of 19; she has four children and is pregnant with her fifth child. Now her husband is in prison and she is left to struggle with no resources for the material and emotional support of the family. Her children came one after the other as there is very little space between each pregnancy.

The immediate program for Manang Ringding is emotional and material support (food, housing, medicines, etc.) Education and information about child care and discipline, health, nutrition and sanitation come next. The third phase is to encourage self-reliance by opening up opportunities for income generating projects that she can engage in to support her family. There is a need to plan out steps to alleviate her husband's condition, to plan detention visits, to ask who is in charge of the prison, to write petitions for the release of her husband, and to write relatives who can visit with her husband and give moral and psychological support. And lastly to get the doctor's advise about her heart condition.

Everyday the family's status was observed. Mothers at the center were grouped and trained. Playing, reading and art therapy

were part of the daily routine. Chores were divided among the families and recreation time was allotted for educational activities. Staff members paid particular attention to their diet. Talking about food requirements and explaining why these are needed by the body became part of the educational program. Vegetables became part of their daily fare. Meals were planned and prepared jointly so that they were appetizing for the families.

CRC staff and family members both learned from each other. From the verbal exchange about pictures, about their experiences the staff learn of the children's trauma and fears. While the children master part of their fear by knowing they can talk about them without being punished for telling the truth, the staff are alerted to the children's sources of anxieties. The staff use stories to approach sensitive experiences. They read stories and use the symbols in the story to reflect on their particular predicament; the harshness of their experience. The lesson that they need to learn is that there are kind people one can trust. This is a critical lesson for growing children who have been directly victimized by violence. We need to rebuild their confidence in man's good nature and we need to explain the violent experience as the evil product of the man's desire to impose his will on another with the use of force.

CHILDREN OF MANANG RINDING:  
JULIET, BIMBIM, BADOY AND GILDA

The family is a victim of strafing in La Paz, Leyte. They were forced to evacuate to Manila and leave their home behind. While in Manila, their father was detained because he was accused of killing the son of the Chief of Police (Boy Marcos) in the province. Besides which he was accused of being NPA.

The effect of evacuation is confusion mental and emotional due to the constant relocation, uncertainty for their future and the lack of permanence in their living arrangements. This is complicated by their heightened fear and anxiety because the vigilantes (Alsa Masa) are after them, even in Manila. The lack of security in their living conditions and the lack of security in their livelihood enhances their uncertainty about life. The strong emotional insecurity and tension has weakened the family's coping in facing their stressful circumstance brought about by the stress of evacuation. Added to this the usual family support systems are not available to them in Manila. They have no relatives who can provide the emotional and material support that the family needs badly. Due to all these conditions the children's physical resistance has been stretched and everyone of the family members is either sick or borderline in terms of health.

JULIET, the Baby

Juliet was malnourished. When she was brought to the attention of the Center's staff she was skin and bones, she was coughing and had a bad cold, she had fever, she had sores in her body especially



## 47 displacement

in the back and on her forehead, and her stomach was distended. The child was very weak. She was constantly carried by mother and medical diagnosis told us that she had broncho pneumonia. She needed to be hospitalized. She was constantly crying or whining, probably due to her discomfort. She ate only rice broth as the family had no money for anything else, not even milk for the children.

The Medical Action Group helped improve the physical condition of Juliet. CRC helped by providing milk for the family and free medicines. When the care of the family was transferred to the Center the focus remained the proper nutrition and health care.

After three months the health of Juliet improved. She is stouter and she now walks without needing support. She is no longer sick. She laughs and plays with the other children and her appetite is back. Her malnourishment is alleviated.

### BIMBIM, the Favorite Child

Bimbim is the father's favorite. When the father was apprehended he was carrying Bimbim. After his father was carried away by his captors Bimbim could not be separated from his mother. The staff at CRC noticed that Bimbim had a generalized fear of men, especially men who look like police men-- big, dark, brawny men. He cried when men approach him. His source of security was his mother, who would constantly keep him with her even while doing house chores. Any temporary separation made the child cry. The emotional insecurity brought about by confusion, fear and anxiety seemed partly alleviated by dependency on the mother's presence.

Bimbim is three years old. He is second to the youngest, Juliet comes after him. When the staff of the Center saw him, he had a bad cold and high fever. He also had a big boil on his thigh. He was listless, thin and pale. He had rashes on his forehead. He was observed to play with a ball, but even after hours of interaction with other children, he did not demonstrate positive affect like laughter.

At the evacuation Center Bimbim was observed by the staff to be watching the other children at play. He does not join the games probably because his thigh was still hurting from the recent operation. He looked sad as he watched other children at play.

Bimbim hardly talks. He looks and listens while you are talking to him, but he is very quiet and hardly ever responds. Sometimes he even moves away from the person trying to engage him in a conversation. The first task of the rehabilitation process is to establish rapport with the child. To do this constant vigilance on possibilities for developing trust and comradeship is important. For Bimbim this occurred in a group therapy session where other children were reporting their fearful experiences. Developing friendships with the other children is an important part of the rehabilitation process.

As familiarity with the staff is established, the physical needs of the family for food, clothing and shelter are also better attended to. Familiarity with the staff is established quickly by the "titas" who play with the children, sing with them and teach them how to read. Art therapy sessions also expose the children to supportive adult male and female figures. After a while Bimbim learned to smile. He learned to play with boats, wooden trucks, and balls. He laughed and talked with the other children as well. Sometimes he even sang. He learned some games that he played with the staff. He learned to tease.

But, he learned the most important lesson of all... that he had nothing to fear from the staff members of the Center. He can trust that they will not hurt him. The staff eat, play, talk with and tease the children to establish more normal relations.

Part of the daily routine is monitoring the children's diet, their in-take of medicines and visits to the doctor, watching over the disciplinary techniques that the mothers use with their children. Within two weeks, the children's health improved. Diarrhea formerly a chronic condition has stopped and the children are livelier, happier and healthier.

At present Bimbim responds to simple questions whereas before he merely moved quietly away. "Hain na si Gilda" (Where is Gilda?) "Ha ubos." (She is downstairs.)

When you lead him he now follows. When staff members lead him to go upstairs to weigh himself he goes willingly with the "tita". And he does it with a smile. "Ayan, tambok na si Bimbim. Hain na si Badoy?" (See Bimbim is very healthy. Where is Badoy?)

"Ha igpaw (upstairs)." He goes upstairs happily and calls Badoy, his brother so he can too be weighed.

When the staff gives him crayolas, he doodles. He initiates talk and plays. He has also learned to be away from his mother. He laughs, he plays and he interacts with other people at the Center. He is rounder and healthier, more alive and happier.

#### BADOY, the Sickly Child

Third from the eldest Badoy has asthma. He had cold, cough and fever when the Center staff first saw him. He was very weak and lifeless. He could not sleep at night because of asthma attacks. His appetite is very poor. He doesn't eat when when he doesn't like the viand and he resorts to eating rice with soy sauce which was his regular fare at the start of his program.

Like Bimbim he looked worried about life in general. Like Bimbim the process of integrating him with the rest of the group was slow. Patience in following up his medications and his nutritional



## 49 displacement

needs was important, before he felt at ease with the "titas" in the Center.

At present like Bimbim, Badoy plays with the other children. He has not gained weight as much as Bimbim has but his appetite has improved. His asthma attacks are no longer as frequent.

### GILDA, the Hurried Child

At 8 Gilda is the eldest of the four children. After their father was apprehended she cried bitterly.

Gilda is like a young mother for her brothers and sister. She has assumed the responsibility of washing, caring for the younger ones, helping the mother with almost all of the house chores. Often she is unable to join in the games because she has chores to perform.

During one of the story telling sessions, "dumating ang pulis, hinuli and tatay nila, anong ginawa ng mga bata?" (the police came, they caught the father, what did the children do?). Gilda reacted with extreme fear. But it is a fear she will need to master. Memories of her father's capture are still vivid in her mind.

She is well socialized. She joins groups rather easily. But she is sickly as the other children are. She loves coloring books. She learns songs easily and has proven that she can learn to act at the PETA workshops. But the burden of the family seems to settle heavily on her shoulders. And what this means for her future psychological development is not yet clear at the moment. She is a child who has been forced into the role of an adult with no time for play. The most important part of therapy for her is to restore her childhood, to give her time to grow and develop into a caring adult. She needs to master her fears and isolate the sources of these fears. She needs to understand that not all people have malevolent intentions in order for her to trust herself and others. She needs to learn to forgive so that she can react with kindness even in the face of harsh realities.

At this point we have taught her to play. Play enables her to cope with fears that she cannot face and handle in real situations. We have given her alternative cognitions for her situation. We tell her her father was apprehended because he worked with the poor and wanted them to live a decent life. For this he was put in jail, because some people do not want to share the resources of the community with everyone. Because some people want much more than they need.

### INDAY AND MANG PARDO

Pardo was on his way to get grass for his cow when he was accosted by 11 armed men from the local police and the Civilian Home Defense Force. He knew most of them personally so he was surprised

when they pointed a gun at him. They started asking him questions. They wanted to know the whereabouts of Fredo Abadina and a couple, Miguel and Menting Paran. The men claimed that the three were notorious members of the New People's Army. Pardo denied any knowledge of the whereabouts of the men. One of them Fredo was his wife's cousin, but he did not believe that Fredo was a member of the NPA. After a few more questions Pardo was released. He was warned not to tell anyone of this encounter.

At about 10 p.m of May 10, 1986 Inday's sleep was disturbed by the barking of dogs. Soon she realized that she was not the only one who was awakened by the noise. Her father, Pardo from the other part of the room got up and crept near the window. He saw that the men were armed and they were the same group that accosted him the day before.

"But I didn't tell anyone," Pardo thought to himself as he knelt by the window, "why are they back?" He decided to warn his family.

Inday watched her father leave the window and approach her mother. Suddenly a burst of gunfire. She felt a searing pain all over her body. There was so much noise. So much pain. Then suddenly there was silence. Slowly voices whimpering, moaning and then screaming with pain coming from all around her. Inday was unaware that one of the voices was hers.

Inday Paris was born in Toledo, Cebu on June 26, 1979. Her parents, Pardo and Lina are farmers. Inday is fifth of their seven children. The family owns 1 1/2 hectares of land which is planted with coconut trees. Their main source of income however comes from tenanting a 4 1/2 hectares of land with seven other families.

Pardo is a member of a farmers' group called PAMASU. The military regard this group as subversive. Pardo is a deeply religious man. He brings his family to hear mass every Sunday. Inday remembers that her parents were always patient with them, not prone to spanking but merely raising their voice to remind them of their chores. Their family were often together, quite loving and close.

The strafing cost Inday her mother who died on the way to the hospital, and two brothers, the eldest and the youngest who both died instantly. Pardo sustained gunshot wounds in the face, stomach, thigh, and leg. Naty, 15, Inday's older sister was hit in the spine which later led to paralysis of both legs. Inday's right elbow was shattered, her left shoulder (clavicle bone) was broken and sharpnel was embedded on her right leg.

Investigations revealed that armed men opened fire for about 10 minutes. There were 59 bullet entries in the blood stained hut. Pardo reportedly heard the men shout, "Ubos na ang NPA" (the NPA are finished) after they strafed his home. After the incident the



## 51 displacement

family was forced to break up and live in different houses for their protection.

Inday Paris's case was referred to the Children's Rehabilitation Center by Task Force Detainees in Cebu on November, 1986. Both father and daughter were brought to Manila for further medical treatment and psychological rehabilitation.

Medical treatment for father and daughter was the first step. Mobilizing resources for medical expenses was necessary. Moral support for the tragedy was important for father and daughter not to lose hope. The case worker provided this. Consultation at the National Orthopedic Hospital revealed that Inday had to wait five years before their bones can mature before surgery can be done on her arm. Pardo, on the other hand, was operated on to remove the sharpnel in his left leg.

The next step is to prepare father and daughter for their return to Cebu. Inday's therapy consisted of sessions for releasing her feelings of fear and anger regarding the strafing, the loss of loved ones and her present condition. She needs to accept the irreversible change in her life that the strafing has caused and was encouraged to make plans for the future.

To complement his therapy Pardo was given counselling sessions designed to help him sort out his problems as they begin their lives anew. He cannot go back to farming immediately so he was given alternative livelihood projects. He was taking concrete steps towards rebuilding his life.

Inday also participated in literacy programs for transient clients. She joined group therapy sessions at the Center. Pardo joined the maintenance of the Center to establish a routine for himself. He joined parents every Saturday and participated in activities designed for them. He was being prepared to cope and be self-reliant when he returns home to Cebu.

During Inday's stay at CRC she was active and very eager to learn. Though she had no previous schooling she learned to write in block letters by copying them again and again, unmindful of her deformity. Inday was able to make friends with other children easily and shared with them some of her happier memories. "I have a lot of friends in Cebu", she would say. "We always run around the neighborhood. When I'm not allowed to go out, I would play with my brothers and sisters in the yard. When my brothers and parents are in the farm, I help in the house chores. I scrub and sweep the floor, help wash the clothes, clean and prepare the table. I'm too young to cook and market. Maybe when I'm older my parents will allow me to do that."

Facilitation of the child's and her father's return to Cebu is part of the rehabilitation program. Documents, endorsements and referrals necessary for the family's settling down was prepared. Funds were procured for the transportation back. Coordination with

the receiving agency and possible resources that can be tapped for the family's needs were identified. The Center also gained clearance for the security status of the family and cooperation in monitoring the progress of the case.

After three months in Cebu Pardo heard that there were men still looking for him. He decided to leave Inday with the family that took in two of his other children, Naty and Isa. Then, he disappeared and was never heard from again.

Today Inday is in Grade One. She is materially well provided for. She is normally her cheerful self. However there are times of quiet when sadness overcomes her and tears form quietly in her big eyes. Asked if she is alright, she looked up and whispered a muted pain, "I miss my father."

How many more tear-eyed children miss their fathers because they have been separated by this senseless war?

*Tears flow from hearts of flesh  
The spirit never weeps  
I'm waiting for the day  
When I will walk in light  
Where tears are wiped away  
Where*

*Justice  
Love, and  
Righteousness  
Reigns supreme.*

First two lines are from  
The Aquarian Gospel of Jesus, the Christ  
Levi, 1972



## KAPATID

Karugtong ka ng buhay  
Kabahagi ng luha at tuwa  
Kasuong sa landas na matarik  
Nasaan ka ngayong bumabagyo sa atin?

Hindi ba't minamahal ka ng higit sa aking buhay?  
Ano't pinagbubuhatan mo ako ng kamay?  
Anong nagawa kong lubos ang iyong pagkasuklam  
Bala ba sukli ng buong buhay na pakikiramay?

Kapatid, karugtong ng aking buhay  
Ano't kay itim ng iyong hangarin?  
Di ba't salamin ng kaluluwa ang ating minamahal?  
Paano natin haharapin ang kinabukasan?

I have known thee, my Lord,  
 in many forms of kindness and tenderness.  
 I have loved thy beauty in perfection  
 expressed with words, expressed without words.

Let me now learn to love thy beauty in imperfection  
 in man's ugliness cringing in shame and bitterness.  
 For if man is made to your image and likeness,  
 Then ugliness must still embody what is noble and good.

Let me long for thy coming  
 When I can become what I was meant to be.  
 And finally know the fullness of being with you  
 How will you finally judge me?

My Lord, when evening calls  
 I look at your face  
 that brings me home.

You are the anchor of my troubled soul.  
 Do not hide your face from me  
 Do not desert me in this agony

Tell me your will  
 That I might find the strength  
 My Lord, to love your path.

Save me from myself  
 That I might know how to lose myself in Thee.

And when my days are done  
 That I might find the Truth  
 And yet with grace submit that it was mine.  
 How long shall you hide your face from me. My Lord?

Let me know, my Lord,  
 kindness in your manner,  
 gentleness in your caring,  
 constancy in your love  
 The totality of your being.

The silent longing of a hungry child  
 for a love that was never there.  
 And the eternal question,  
 Can someone really care.

I shall sit by your side  
 Knowing that you have come for me.  
 And live as fully as you gave me life,  
 That brings me joy and peace.



## CHILDREN'S REHABILITATION CENTER JULY 1987 - JUNE 1988

The Children's Rehabilitation Center (CRC) has now completed its third year of operations helping children victims of political armed conflict. During the three years of its operations CRC has reached about 3,500 children from all over the Philippines. The number of children victimized by the political conflict this year alone is estimated to be 170,184. In other words, the number reached by the CRC represents less than one percent (.7%) of the total documented cases of children victims.

### WHY THE CRC?

The past dictatorial regime of Marcos brought hundreds of people who dared to protest to languish in jails, military camps or safe houses without due process. In June of 1985 CRC was set-up as an institution focused on helping children and their families who suffer emotional, economic, psychological, and health problems due to arrests, torture, forcible displacements, strafing, massacres, and other forms of human right violations. Professionals in Psychology, Child Education, Social Work and other concerned citizens have come together to provide services to victims of the political struggle in the country. Initially focused on the direct and indirect children victims of political detention, the mandate has expanded to include victims of the ongoing militarization in the country.

### ACTIVITIES

#### 1. Treatment and Rehabilitation

Coping with stressful life situations brought about by political armed conflict, children and families are taught skills for adjusting to new life situations. These are in the form of individual or group therapy programs supplemented by support programs for families.

In support of the therapy programs the Center also provides for the basic needs of the children in the form of medical, educational, and nutritional assistance. Part of the support assistance is in the form of income generating projects given to families.

There is also a support program for orphan children who have lost one or both parents in the armed conflict. CRC provides the mechanism to place orphans with foster parents and strengthens the family structure once these children have been placed.

From July 1987 to June 1988, CRC was able to help 1,681 individuals, 1,138 are children and 543 are adults. Long-term assistance to 204 children and 77 parents and short-term assistance to 934 children and 466 adults have been included in these figures.

Table 1 Summary of Services  
Beneficiaries:

Services Rendered: adults	No of children	No of families	No of
1. Group Therapy	116		
2. Summer Program	51		
3. Individual Therapy	67	32	
4. Emergency Cases ( Housing, Medical assistance)	55		
5. Parents' Support Program			40
6. Family Support Services ( Nutritional, Educational, Medical)	170	60	
7. Income Generating Projects	86	32	77
8. Orphan Support	48		
9. Relief Missions	934	233	466

Seventy percent of the new cases were direct victims of the political armed conflict. These cases involved victims of evacuation, strafing and massacre. There were some children whose parents were detained, harassed or salvaged. All came from regions of the country where armed conflict was most intense.

These numbers who had been reached represent a very small proportion compared to the estimated victims affected by the present war. From January 1987 to May 1988 alone the children victimized by the ongoing conflict is estimated to be 170,184. The number reached by CRC therefore represents less than 1% or .7% of the total number of documented cases. The long-term cases where the impact of CRC's services is evident represents a mere .12% of the total number.

#### a. Individual Therapy Program

In the past year 67 children belonging to 32 families were closely monitored. This represents less than half of the children given long term assistance. These are also the cases showing marked improvement. Many of these children have been with CRC for more than a year and some are being prepared for termination.

#### b. Group Therapy Program

Group Therapy has been part of the therapy and rehabilitation procedures of CRC since its inception. We have found that it is a good way of gaining rapport with new clients. It is a good way of developing cognitive and practical skills. It is also a way of communicating feedback to clients, parents and staff members.

However, our group therapy work used to be topic oriented following a specified curriculum or dealing with previously identified issues. Sometimes we have resource persons to provide inputs, especially when the problems are fairly specific and could be identified at the start. An example of this topic oriented,



curriculum based program would be the activities we undertook in preparation for the Children's Human Rights celebration in December. We found some of the children inattentive to such topics where they were mere passive participants. We have moved from this topic orientation to a process orientation.

A skills centered program enabled the clients to actively participate in the activities. CRC tapped the experience of some institutions like the Philippine Educational Theater Association (PETA) to design a curriculum focused on facilitating, observing, and developing basic integrated art skills. This change in approach developed more interest in the beneficiaries, particularly in those around ten years old and older. Although more modules need to be prepared and additional staff training is required, this new direction is proving more effective than the topic based approach to group therapy.

#### c. Summer Program

Summer Programs are an annual activity of CRC designed to reach more children for longer time periods due to the vacation months when children are free. It is thereby more intensive, taking place four days a week instead of once a week. It is meant to complement the group therapy program conducted year round.

This year the CRC decided to limit the number of children to 51 instead of the larger numbers the years before. The last two years we had 90 children participating in these programs. We focussed on the acquisition of skills in body movement or creative dance, visual arts, basket ball and outdoor life.

The children stayed at the Center for three days and two nights with older children coming for an additional day. The program enabled the staff to interact with the children for 72 hours a week, permitting a richer, deeper and more sustained interaction for the two month period.

Observations were more intensive. Skills had a chance of being learned more efficiently. And the learning was sustained. In the end the children enthusiastically developed skits that demonstrated their newly developed self-confidence. Meaningful relationships were formed between children and staff members which enabled the children to open-up. Fears and anxieties were explored more openly and enabling the staff to share coping mechanisms by the developing emotional support systems.

Experiences in this new summer program can be viewed as a first step in developing a community-based approach that CRC is thinking of implementing next year. So far our approach to therapy and rehabilitation is either center-based or home-based. This limits the numbers we are able to reach. With programs that are community-based we can maximize our efforts that are currently being limited by the number of trained staff at the Center. Community-based programs are expected to be more intensive as they can be more

frequently held. They are also expected to be more flexible to be more suitable to the needs of the clients and, therefore, more meaningful. Local resources can also be more easily tapped, increasing staff manpower resources.

#### d. Parents' Program

CRC views the parents' program as part and parcel of the rehabilitation process with children. Counselling sessions with parents are conducted at the individual or at the inter- or intra-family level. Several problems have been identified in this area. One is the lack of time of parents for sustained counselling work. The other is the negative attitude towards rehabilitation as a process. Rehabilitation in the Philippines is associated with mental illness or mental imbalance which has made some parents reluctant to participate.

One way of solving this problem has been to drop the concept of rehabilitation from the programs or even from the Center's name. Experience with the parents has been that attendance in programs is highest when there is a survival crisis, usually economic in nature. Supports that are most welcome come in the form of either nutrition, medical or income-generating projects, either as loans or grants. Educational or therapy programs get very little support from them.

Security is the other concern of the parent clients. Parents do not feel confident that it is safe to send their children to the center. Reliability of some of the staff members have also been raised. We feel that some of these questions are valid as the overall political situation has worsened over the past year.

CRC is also functioning against some traditional beliefs of child rearing. Authority still has the final say in our society and parents represent for our children the final authority. As some of our children are approaching puberty there is the question of more freedom and flexibility in dealing with them has been raised. Having raised these children to assert their rights, and with the attendant security problem, parents are reluctant to give these children freedom and flexibility in their schedules. Their fears have a real basis. On the other hand, we cannot base our decisions on fears. So we do have a paradox here. We feel that we are educating for more freedom and yet, the danger to their life is real, as the armed conflict is real. Do we restrict their life space because there is danger? Is this not a way of creating a prison for them even while they are supposed to be free?

#### e. Support Services

The basic goal of CRC in these support programs has been to strengthen the families capability in responding to crisis situations with dignity and self determination. The material and financial aid is merely an aid to the overall concern of making the family more capable of responding to crisis. The approach has therefore, been to extend temporary financial support to alleviate



the existing economic crisis. But such support is cut when the family has been referred to other agencies focused on such economic services.

However, while 82.3 % of the families reached have been given financial help either as a loan or as a grant, only 70.5% of the families reached have a sustained therapy program. The repayment of loans is 89 % with most families now sustaining the projects on their own. The goal of the support services is as a stop gap measure prior to more viable long term solution to the economic problems, and the experience with providing economic support service has been rewarding. Sustained therapy with families, which is CRC's primary objective however, is not as successful.

#### f. Orphan Support Services

For a one-year period CRC has been able to serve 48 orphaned children. This included 17 children who were hospitalized because they were themselves wounded when their families were shot at by government security forces. As of June, 1988 only two children are still with CRC as the others have been placed in foster homes.

The procedure for identifying foster homes is to look for friends and relatives of affected families to enhance adjustment. Warmth, love and adequate support from the adopting family is ensured prior to the transfer. Children quickly adjust when these conditions are met. In some cases when the adopting families do not have the economic resources these children receive some material support for food or school fees. In other cases adoptive parents are encouraged to join in educational and counselling sessions.

The problem at CRC is its ability to respond to crisis situations prior to the identification of adopting families. At one time 24 refugees and 8 in-house children were staying in the two bedroom house and office of CRC. Office work was completely disrupted. Security problems are also encountered when the children are sole survivors and sole witnesses to their parents' death. A safe house needs to be identified for these children and this becomes a problem for placement in the appropriate foster homes.

### 2. Outreach Programs

#### a. Relief Missions

From July, 1987 to June, 1988 CRC has conducted 7 relief missions in seven provinces and four regions. This is in connection with its plans for establishing regional centers where the majority of the clients live. Through this process 1,400 individuals have been reached, 934 of them were children. The services included provision of medical supplies, food and clothing. Workshops on health and nutrition focused on herbal medicine were held. Counselling and play therapy, referrals to medical institutions and follow-up of cases after the missions were also conducted.

## 60 report

The required manpower to conduct these missions took from the already strained manpower resources of the center. Security of the staff members who carry out these missions is another serious problem. Usually these mission trips are way into militarized zones where armed conflict is fiercest. And attempts to coordinate these medical mission trips with government agencies have been thwarted by bureaucratic red tape or fear. Two staff members have been apprehended and illegally detained while other members of the mission medical team were brutally attacked by a vigilante group in front of the the whole village. Two guides were tortured in one of these mission trips.

Other problems of transporting needed supplies and personnel are also serious. Oftentimes we are limited by what one can carry into the area on a back pack. Willing drivers with vehicles are hard to come by. There is a need to prioritize the acquisition of a jeep with a four wheel drive to be able to continue this kind of relief missions.

### b. Regional Outreach

We recognize the importance of reaching out to the militarized zones to be able to carry out the mandate of CRC. The need to set-up regional centers is an imperative as the war has extended to far-flung areas in the country side. Linkages with regional organizations is a necessity and staff development in these regions need to be conducted in a systematic way. This is the current thrust of CRC work for the coming year.

Due to the sudden intensification of fighting in regional areas, training people who are already in the region who are interested in working with rehabilitating children seems to be a more viable alternative. By developing skills in staff members of other organizations it would be possible to do CRC work without necessarily establishing CRC regional centers. CRC can then concentrate on training of therapists or counselors, on monitoring educational and recreational children's activities and on providing the necessary logistical support for regional organizations that can do therapy and rehabilitation work with children.

### c. Urban Community Outreach

Military repression has not spared Metro Manila residents where many trade unionists live. The work for urban community outreach started on May, 1988. The community is located in the northeast portion of Metro Manila comprising of 60 families with about 240 children. CRC felt that setting up a community-based program for children in this community where an organization already exists would be easier. Cooperation from trade union members was solicited since the program is mainly for their children. Linkages with government and non-government agencies working in the area are being established.



### 3. Research and Documentation Program

The pioneering nature of CRC work makes it imperative to implement its own research and documentation program to develop indigenous concepts and techniques in treatment and rehabilitation with children. Systematization and publication of CRC experience is primary in this regard. This year CRC has focused on the development of an in-home supplementary education manual, a training manual for its staff, and a systematization of its case journals and records for use in developing conceptual papers.

Also in support of the researches being conducted CRC is improving its collection of books and materials on various aspects of crisis intervention and coping under difficult situations. To make documentation and administration easier, a computer was purchased for staff use.

### 4. Staff Development and Training Program

#### a. Training Program

To deepen the understanding of basic principles and methods in developing staff members for work with rehabilitating children victims of armed conflict, lectures, group discussions, and workshops were held on the following topics throughout the year.

- 1) Problem solving process from the social work approach
- 2) Family therapy
- 3) Politics and crisis intervention
- 4) Curriculum development for skills training
- 5) Relaxation techniques as a form of therapy
- 6) Basic integrated theater arts
- 7) Structured learning approach
- 8) Philosophy of development of processes and knowledge
- 9) Developments in the political, economic and social

situation in Philippine society.

These sessions lasted for periods ranging from 2 days to one week. These were supplemented with visits to two community based programs for children.

#### b. Staff Therapy Support Program

The demands of CRC work on the staff members and the depressing nature of the cases handled create conditions of stress for CRC staff. The Center has instituted measures through which burn-out could be avoided. A therapy program for the staff has been instituted. This year a series of six intensive and systematized therapy sessions for the staff was conducted. It involved group dynamics exercises and games revolving around self and their relation to the environment and other people. It gave the staff a chance to evaluate themselves as persons and in relation with one another. The improved relations of the staff with each other can be attributed to these periodic sessions. A deeper commitment to CRC work has resulted from these sessions.

## 5. Campaign Programs

Part of the overall educational program of CRC is to develop public awareness to the situation of children victims of militarization. The long term solution to the children's plight is seen in the promotion of protection of children's rights in the whole society. Hopefully this will also mobilize people to actively promote peaceful solutions to conflict and enhance the development of a truly functioning democracy to promote national development.

Since the campaigns are aimed at generating support for the plight of children and families, through the ideals of democracy, peace and national development the campaigns are an indirect rehabilitation strategy. Through people participation conditions are created for the prevention of further violations of children's rights.

### a. Newsletter and Update Letters

In May, 1987, CRC came out with its newsletter "Children of the Storm". The second issue came out in late July, 1987. It was intended to inform partner organizations, friends and other interested parties of the activities of CRC. It was also the official channel through which CRC could express its views about the various aspects of children's situation and rehabilitation. The publication has since been discontinued for lack of manpower and logistical support.

The developments in the political situation has been very fast. The needs immediate. And letters of appeals had a better chance of responding quickly to a fast changing situation. Besides supporting evidence could be duplicated by xerox machine to document cases that may compromise the stand of CRC in a politically unstable social situation.

### b. Public Information Campaigns

During the past year CRC has launched two major campaigns. One was in September to October in support of the International day of the Child. The other was in November to December in support of the celebration of Human Rights Day.

Although the number of people reached cannot be estimated, highest possible visibility was targeted as the photo exhibits was displayed in two shopping malls. Lectures and exhibits were also conducted in four major universities and two high schools. It was the first time lectures and exhibits were done for high school students and it was a learning experience for CRC staff members.

CRC children contributed to the staging of presentations at Luneta Park on December 9 and 10. A total of about 1,200 people watched the presentations. The musical play exposed the children to



## 63 report

the rudiments of theater, script writing and composition and the making of props for their musical presentation. Several organizations cooperated to be able to hold the four hour presentation. It was the product of two months of work for the children and they felt rewarded as the audience responded appreciatively to their performance.

### c. Media Campaigns

Media coverage of CRC last year came in the form local media coverage and three foreign documentaries. Due to the coups, constitutional plebiscite and two national elections, children's concerns are not upper most in the minds and priorities of media men.

### d. Generation of Financial and Manpower Support

An important measure of the effectiveness of the campaign programs is the support, both financial and manpower support it generated. This past year 10 % of CRC's operational expense was covered by the funds raised in these campaigns.

We still receive the same number of volunteers but the average stay of volunteers at the Center has been for a shorter time. The decline in support is probably due to the slowing down of the campaign program for the last few months as CRC is focused on regional work, relief missions and the summer children's program.

### e. Linkages and Networking

No significant developments in this area as the same organizations have supported CRC work are still supporting it now. However, some organizations that are community based have expressed interest in training their workers in work with children. CRC will take a lead role in the training of barefoot psychologists who can do crisis intervention and therapy with children, while the actual case handling will be done by the different organizations concerned. In difficult to reach places this may be the only alternative.

While there are some disadvantages to this approach to CRC work it looks like this is the only way we can reach the children victims in more numbers without necessarily over taxing the staff. For this, good training manuals need to be prepared and training would have to be supplemented regularly to be able to meet the changing needs of the client population.

Since training workers in other organizations can have a multiplier effect, it can also dilute the effectiveness of the therapy itself. CRC must be prepared to cope with the more difficult cases in either case. Since the population of children reached would be wider we also expect that the more difficult cases will come to us. This will require time and special expertise to be allocated for these difficult cases.

## 6. Administrative Work

CRC conducted two administrative conferences to deal with its increase in staff members in January and June, 1988. From 15 full time staff three more were added in January and four more in June. The total number of full time staff members at the moment is 22.

Since policy making is a cooperative activity at CRC the senior staff members have constituted themselves into a committee for the younger staff members to gain access to previous experience and expertise more easily. Training of new members becomes a joint activity of all senior members.

Some problems arose with this manner of introducing new staff into the rigorous work with the children. Interpersonal problems had to be clarified in order to thresh out difficulties with supervision. The basic principle of collective leadership assumes equal expertise in the management of cases and equal experience in decision making. Younger staff need training and expertise to fully participate in the process. Hence, the task of training new members and closely supervising new workers becomes an important task for CRC senior staff.

## 7. Income Generating Projects

June, 1988, marked the end of the Norfil-CRC program. A total of 88 children of the 32 project beneficiaries were helped by this program. Eighty five percent of the children representing 29 families have graduated and 13 children or three families are being prepared for case termination.

The psychosocial changes in the parent beneficiaries can be summarized into three: First, the restoration of the breadwinning role of the head of the family. Second, increase in income boosted their confidence in themselves as contributing members of the family and the community. Third, there is a remarkable improvement in disposition which enhanced their awareness of their children's and other people's needs. They tended to extend help to fellow proponents and clients. Truly, we observe that when his immediate survival needs are satisfied, man reaches out to fulfill his social need to help others survive.

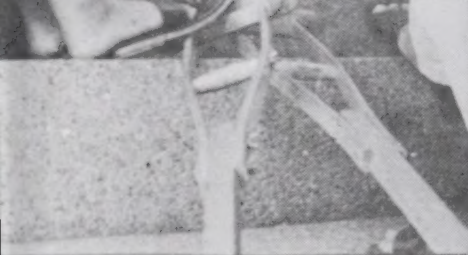
The income generating projects can be summarized as buy and sell, vending, handicraft, and agri-business such as swine raising. Handicraft includes handpainting of a variety of products like, jewelry, pots, pendants, cards, wall decorations, desk organizers, jewelry boxes, and others. Usually a multi-project scheme is adopted to allow for creativity, productivity, and self-determination. Parents have formed a cooperative for a wider swine dispersal among the 32 family beneficiaries of this two year project with Norfil-CRC. Discovering their strength in numbers has enabled them to plan for themselves with confidence for the future.













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